

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 716138

**Entity Name:** VILLA DEL SOL, INC.

**Current Principal Place of Business:**

11000 S OCEAN DR.  
JENSEN BCH, FL 34957

**Current Mailing Address:**

11000 S OCEAN DR.  
OFFICE  
JENSEN BCH, FL 34957

**FEI Number:** 59-1909648

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORNETT, JANE L., ESQ.  
401 EAST OCEOLA STREET  
STUART, FL 34994 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title SD  
Name MAJOR, JANETTE  
Address 430 NW LAKE WHITNEY PL  
City-State-Zip: PORT ST. LUCIE FL 34986

Title TD  
Name BALDES, WILLIAM  
Address 430 NW LAKE WHITNEY PL  
City-State-Zip: PORT ST. LUCIE FL 34986

Title PD  
Name KINSELLA, LARRY  
Address 430 NW LAKE WHITNEY PL  
City-State-Zip: PORT ST. LUCIE FL 34986

Title VP  
Name MCMAHON, TOM  
Address 460 NW LAKE WHITNEY PL  
City-State-Zip: PORT ST. LUCIE FL 34986

Title DIRECTOR  
Name CARBONEAU, WILLIAM  
Address 430 NW LAKE WHITNEY PL  
City-State-Zip: PORT ST. LUCIE FL 34986

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** LARRY KINSELLA

**PRESIDENT**

**03/03/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date