## 2016 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:

C/O PINNACLE AM LLC

430 NW LAKE WHITNEY PLACE PORT ST. LUCIE, FL 34986 US

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

Officer/Director Detail:

Title SECRETARY Title DIRECTOR

Name MULLANE, VALERIE Name BALDES, WILLIAM

Address C/O PINNACLE AM LLC Address C/O PINNACLE AM LLC

430 NW LAKE WHITNEY PLACE 430 NW LAKE WHITNEY PLACE

City-State-Zip: PORT ST. LUCIE FL 34986 City-State-Zip: PORT ST. LUCIE FL 34986

Title PRESIDENT Title VP

Name SILLAN, SHIRLEY Name EDWARDS, MELANIE

Address C/O PINNACLE AM LLC Address C/O PINNACLE AM LLC

430 NW LAKE WHITNEY PLACE 430 NW LAKE WHITNEY PLACE

City-State-Zip: PORT ST. LUCIE FL 34986 City-State-Zip: PORT ST. LUCIE FL 34986

Title DIRECTOR Title TREASURER

Name DURHAM, PAUL Name FABER, ROBERT

Address C/O PINNACLE AM LLC Address C/O PINNACLE AM LLC

430 NW LAKE WHITNEY PLACE 430 NW LAKE WHITNEY PLACE

City-State-Zip: PORT ST. LUCIE FL 34986 City-State-Zip: PORT ST. LUCIE FL 34986

Title DIRECTOR

Name BOUCHIE, MARY ELLEN
Address C/O PINNACLE AM LLC

430 NW LAKE WHITNEY PLACE

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: SHIRLEY SILLAN PRESIDENT 03/28/2016

Electronic Signature of Signing Officer/Director Detail

Date

FILED Mar 28, 2016

Secretary of State

CC4621326947

Date