

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

DOCUMENT# 745173

**Entity Name:** THE VILLAS-LAKES ASSOCIATION, INC.**Current Principal Place of Business:**1590 N. HIATUS ROAD  
PEMBROKE PINES, FL 33026**Current Mailing Address:**1590 N. HIATUS ROAD  
PEMBROKE PINES, FL 33026**FEI Number: 59-1903157****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**NACHMAN, IRVIN W.  
4441 STIRLING ROAD  
FT. LAUDERDALE, FL 33314 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	S
Name	FUILLERAT, VIRGINIA
Address	11210 NW 14 COURT
City-State-Zip:	PEMBROKE PINES FL 33026

Title	DIRECTOR
Name	HART, ROSEMARIE
Address	11248 NW 14 CT
City-State-Zip:	PEMBROKE PINES FL 33026

Title	T
Name	SCARLETT, MICHAEL
Address	11243 NW 16 COURT
City-State-Zip:	PEMBROKE PINES FL 33026

Title	P
Name	CARIDE, ISABEL
Address	11241 NW 14 COURT
City-State-Zip:	PEMBROKE PINES FL 33026

Title	DIRECTOR
Name	WALTERS, MARY A.
Address	11308 NW 14 COURT
City-State-Zip:	PEMBROKE PINES FL 33026

Title	VP
Name	JOVE, EYDA
Address	11325 NW 16 STREET
City-State-Zip:	PEMBROKE PINES FL 33026

*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: ISABEL CARIDE****PRESIDENT****03/20/2014**

Electronic Signature of Signing Officer/Director Detail

Date