

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

DOCUMENT# N03000010325

**FILED**  
**May 01, 2014**  
**Secretary of State**  
**CC6453110107**

**Entity Name:** ANTILLES VILLAS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1139 MORRIS AVENUE  
ORLANDO, FL 32803

**Current Mailing Address:**

1139 MORRIS AVENUE  
ORLANDO, FL 32803

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

STEWART, JUDY L  
1139 MORRIS AVENUE  
ORLANDO, FL 32803 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	P	Title	VP
Name	STEWART, JUDY L	Name	FARR, PIERCE
Address	1139 MORRIS AVENUE	Address	1141 MORRIS AVENUE
City-State-Zip:	ORLANDO FL 32803	City-State-Zip:	ORLANDO FL 32803

*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: JUDY STEWART**

**PRESIDENT**

**05/01/2014**

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

\_\_\_\_\_  
Date