

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000007934

**Entity Name:** VILLA VALDEZ HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

722 DUMAS ST  
THE VILLAGES, FL 32159

**Current Mailing Address:**

PO BOX 2276  
LADY LAKE, FL 32158

**FEI Number:** 27-0763955

**Certificate of Status Desired:** Yes

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

MILLHORN LAW FIRM.  
1370 U.S. HIGHWAY 441  
SUITE 100  
THE VILLAGES, FL 32159 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 DIRECTOR  
Name GRAY, PATRICIA  
Address 724 DUMAS STREET  
City-State-Zip: THE VILLAGES FL 32159

Title DIRECTOR  
Name CONNOR, LEANNE  
Address 722 DUMAS STREET  
City-State-Zip: THE VILLAGES FL 32159

Title DIRECTOR  
Name LANGE, DOUGLAS  
Address 715 VILLITA LANE  
City-State-Zip: THE VILLAGES FL 32159

Title DIRECTOR  
Name SIMON, JACK  
Address 702 VILLITA LANE  
City-State-Zip: LADY LAKE FL 32159

Title DIRECTOR  
Name NELSON, DAVID  
Address 723 VILLITA LANE  
City-State-Zip: LADY LAKE FL 32159

*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:** DOUGLAS PAUL LANGE

**TREASURER**

**04/12/2023**

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

\_\_\_\_\_  
Date