

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 12, 2013
Secretary of State
CC6743334515

Entity Name: VILLA VERONA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O RESORT MANAGEMENT
2685 HORSESHOE DRIVE SOUTH STE#215
NAPLES, FL 34104

Current Mailing Address:

C/O RESORT MANAGEMENT
2685 HORSESHOE DRIVE SOUTH STE#215
NAPLES, FL 34104

FEI Number: 65-0404336

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

POTTER, PATRICIA JESQ.
SIESKY, PILON & POTTER
3435 10TH STREET NORTH, SUITE 303
NAPLES, FL 34103 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
Name DUBA, ADELE
Address 62 FOUNTAIN CIRCLE
City-State-Zip: NAPLES FL 34119

Title S
Name BEAUDREAU, LINDA
Address 78 FOUNTAIN CIRCLE
City-State-Zip: NAPLES FL 34119

Title VP
Name MATZKE, JAMES
Address 90 FOUNTAIN CIRCLE
City-State-Zip: NAPLES FL 34119

Title T
Name BUTCHKO, DIANE J
Address 64 FOUNTAIN CIRCLE
City-State-Zip: NAPLES FL 34119

Title D
Name LANGAN, MICHAEL
Address 108 FOUNTAIN CIRCLE
City-State-Zip: NAPLES FL 34119

Title D
Name WALLEY, ROSEMARY
Address 3419 ALLEGHENY CT
City-State-Zip: NAPLES FL 34120

Title DIRECTOR
Name BISHOP, JAY
Address 82 FOUNTAIN CIRCLE
City-State-Zip: NAPLES FL 34119

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: ADELE DUBA

P

03/12/2013

Electronic Signature of Signing Officer/Director Detail

Date