

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000000136

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

**Current Principal Place of Business:**

C/O CAPITAL CARE GROUP  
1016 COLLIER CENTER WAY SUITE 205  
NAPLES, FL 34110

**Current Mailing Address:**

C/O CAPITAL CARE GROUP  
1016 COLLIER CENTER WAY SUITE 205  
NAPLES, FL 34110 US

**FEI Number:** 65-0404336

**Certificate of Status Desired:** No

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

LINDSEY & ALLEN, PLLC  
13180 LIVINGSTON RD  
NAPLES, FL 34109 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:** TODD ALLEN

02/12/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

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

Title            T  
Name            HANSEN, PATSY  
Address        106 FOUNTAIN CIRCLE  
City-State-Zip: NAPLES FL 34119

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

Title            SECRETARY  
Name            DUNNAVANT , GAIL  
Address        102 FOUNTAIN CIRCLE  
City-State-Zip: NAPLES FL 34119-4637

*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:** JAMES MATZKE

PRESIDENT

02/12/2019

Electronic Signature of Signing Officer/Director Detail

Date