CONDOMINIUM ASSOCIATION INFORMATION UPDATE FORM

All information provided is public information. Changes are to be made by an officer of the condominium association. Please use a typewriter or print legibly in black ink. t1 1547 Submit completed form to: DCCA - P&VLD Real Estate Commission 335 Merchant Street, Room 333 Honolulu, HI 96813 Name of Condominium Association: VILLAGES AT MAYNA LANI The information provided on this form is current as of _________ 1.2008 and replaces the information previously provided to the Real Estate Commission ("Commission"). Please indicate the change being reported: [] Names and positions of the officers of the association (President, Secretary and Treasurer required): [] Designated officer of the association who can be contacted directly: Officer's Public Mailing Address: ____ Management status: (Check ONE only and fill in corresponding information) [] Self-managed by the Association of Apartment Owners (AOAO) Name of manager: Telephone No.: Managed by Condominium Managing Agent Contact Person: Susan 75-1029 HONRY Telephone No.: 808 - 327 - 53 KONA 96740 [] Contact designation (individual) to receive all AOAO correspondence (except bulletins) and telephone calls from the Commission: (if different from above) ______Title: ____ Telephone No.: Mailing Address: A I certify that I am authorized to sign this form on behalf of this condominium association, and that the information provided is true and correct. of assertion officer, developer or 100% sole owner of condominium project 3-6-08 Date Check one only: MPresident [] Vice-President [] Secretary [] Treasurer Developer or Developer's Agent registering for unorganized association [] 100% Sole Owner of Condominium Project