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Mar 18 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 712536 (2)
1. Corporation Name
VILLAGE GARDEN CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: 401 US HIGHWAY ONE NORTH PALM BEACH FL 33408-5508
Mailing Address: 401 US HIGHWAY ONE NORTH PALM BEACH FL 33408-5508

3. Date Incorporated or Qualified: 04/04/1967
3a. Date of Last Report: 04/24/1996
4. FEI Number: 59-2410389
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business (21-24)
2a. Mailing Address (25-28)
City & State (22, 27)
Suite, Apt. #, etc. (23, 28)
Zip (24, 29)
Country (25, 30)

9. Name and Address of Current Registered Agent
MARICH, KAREN B.
CUSTOM PROPERTY MANAGEMENT INC
2328 S CONGRESS AVE SUITE 2A
WEST PALM BEACH FL 33406

10. Name and Address of New Registered Agent
81 Name: DAVID H. VOLK
82 Street Address (P.O. Box Number is Not Acceptable): CPM INC
83 2328 S. Congress Ave STE 2A
84 W.P.B. FL 85 Zip Code: 33406

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NO) Registered Agent signature required when (reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	
NAME	DICKERSON, ERBY	1.2 NAME	
STREET ADDRESS	419 US HWY. 1	1.3 STREET ADDRESS	
CITY-ST-ZIP	N PALM BEACH FL	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	
NAME	PRYOR, KENNETH	2.2 NAME	
STREET ADDRESS	419 US HWY 1	2.3 STREET ADDRESS	
CITY-ST-ZIP	N PALM BEACH FL	2.4 CITY-ST-ZIP	
TITLE	S	3.1 TITLE	
NAME	MARICH, KAREN B.	3.2 NAME	S DAVID H. VOLK
STREET ADDRESS	401-419 US HIGHWAY ONE	3.3 STREET ADDRESS	SAME
CITY-ST-ZIP	N PALM BEACH FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	
NAME	LANE, BOB	4.2 NAME	
STREET ADDRESS	415 US HWY. A	4.3 STREET ADDRESS	
CITY-ST-ZIP	N PALM BEACH FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	
NAME	CORMIER, ROBERT	5.2 NAME	D Richard Moore
STREET ADDRESS	419 US HWY 1 (203E)	5.3 STREET ADDRESS	405 US HWY 1 (204B)
CITY-ST-ZIP	N PALM BEACH FL	5.4 CITY-ST-ZIP	N. P. B. FL.
TITLE	P	6.1 TITLE	
NAME	BORN, MARGO	6.2 NAME	
STREET ADDRESS	705 W IBIS WAY	6.3 STREET ADDRESS	
CITY-ST-ZIP	NORTH PALM BEACH FL	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)