

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 28, 2008 8:00 am**  
**Secretary of State**

03-28-2008 90037 041 \*\*\*\*61.25

EPDVNF0U!\$ 716285  
 2/ Entity Name  
 THE VILLAGE BY THE SEA CONDOMINIUM APARTMENTS INC.



Principal Place of Business  
 1967 S OCEAN BLVD  
 LAUDERDALE BY THE SEA, FL 33062 US

Mailing Address  
 1971 W. MCNAB ROAD  
 SUITE #2  
 POMPANO BEACH, FL 33069

66008066



3/ Principal Place of Business - No P.O. Box #  
 90 Prop. mgmt. Ptnes  
 Suite, Apt. #, etc.  
 220

4/ Mailing Address  
 7300 W McNab  
 Suite, Apt. #, etc.

03182008 Di h.00 DS3F148 )23017\*

City & State  
 Tamarac, FL

5/ FEI Number  
 59-1145419

Applied For  
 Not Applicable

Zip  
 33321

Country  
 Broward

6/ Certificate of Status Desired  %8/86 Beejupobm  
 Gf IISf r vj l e

7/ Obn f lboelBeeff t t lpgDvssf ouSf hjt u f e lBhf ou

ALL FLORIDA MANAGEMENT SERVICES  
 1971 W. MCNAB ROAD  
 SUITE #2  
 POMPANO BEACH, FL 33069

8/ Obn f lboelBeeff t t lpgDf x iSf hjt u f e lBhf ou

Name  
 Prop. mgmt. Partners

Street Address (P.O. Box Number is Not Acceptable)  
 7300 W McNab

#220

City  
 Tamarac FL GM

Zip Code  
 33321

9/ 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Sherry Southard* Vice president 3-20-08  
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reissuing) DATE

Filing Fee is \$81.25  
 Due by May 1, 2008

10/ Election Campaign Financing  
 Trust Fund Contribution.

11/ Nbz l Cf l  
 Beeff etup G f t

Nbl f d f d qbzberh up  
 Gpsjeb: Ef qbsn f oupg Tubu

21/ OFFICERS AND DIRECTORS		22/ ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WOLF, AMY 1967 S OCEAN BLVD, #422-D LAUDERDALE BY THE SEA, FL 33062 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KAILING, ANN 1967 S.OCEAN BLVD. #319-D LAUDERDALE BY THE SEA, FL 33062 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MILSTEIN, RUBIN MILSHTEIN 1967 S.OCEAN BLVD., #328-D LAUDERDALE BY THE SEA, FL 33062 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director MILSTEIN, RUBIN <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SOUTHARD, SHERRY 1967 S.OCEAN BLVD., #414-C LAUDERDALE BY THE SEA, FL 33062 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERNANDEZ, DOLORES 1967 S.OCEAN BLVD., #314-C POMPANO BEACH, FL 33062 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Margaret Anderson 1967 S. Ocean Blvd C-420 Lauderdale by the Sea, FL 33062 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

23/ I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

T.J.HOBUSF; *Sherry Southard* Vice president 3-20-08  
 T.J.HOBUSF DATE TIME FILED P.O. BOX ZIP CITY STATE ZIP+4 PGT. HOLDING OFFICE STATE OF FLORIDA Date Daytime Phone #