FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

VILLAGE HOYALE GREENBRIAH ASSOCIATION, INC.								
Principal Place of Business		Mailing Address		!!!	-USIN 10010 NIBIN 00191 NUIVA NINOT	1441 01917 01914 04944 049	AL MARK MINICIPAL	
2515 N.E. 1ST COURT APT. 210 BOYNTON BCH FL 33435		2515 N.E. 1ST COURT APT. 210 BOYNTON BCH FL 33435						
				04	acorporated or Qualified 4/30/1971	3a. Date of Last 03/08/1	•	
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Nu	mber 9-4461404		Applied For Not Applicable	
Suite, Apt. i	#, etc.	Suite, Apt. #, etc.	 				5 Additional	
22 Apt. 317		27 Apt 317		5. Certific	ate of Status Desired		Required	
City & State		City & State			n Campaign Financing	\$5.0	00 May Be	
		28			Trust rund Contribution — Added to Fees			
Ζφ 24	Country Zip Cour 25 29 30		Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
	9. Name and Address of Current		1001		and Address of New Re			
			81 N	lame				
VRG OWNERS LEAGUE INC 2505 NE 2ND COURT			82 S	82 Street Address (P.O. Box Number is Not Acceptable)				
BOYNTON BEACH FL 33435			83					
			84 0	Sity		FL 85 Z	ip Code	
or register	to the provisions of Sections 617.0502 ed agent, or both, in the State of Florid th, and accept the obligations of, Section	a. Such change was authoriz	ted by the corpora	ned corporation submits tion's board of directors.	this statement for the purp I hereby accept the appo	cose of changing its	registered office d agent. I am	
SIGNATURE		or other design and the second	<i>.</i>					
OIGHATOTIE ,	Signature, typeo or printed name of registered agent a	and title if applicable (NO	DTE: Registered Agent sig	nature required when reinstaling)		DATE		
12.	OFFICERS AND		13.	ADDITI	ONS/CHANGES TO OFFIC			
T:TLE	PDVD	DELETE	1.1 TITLE	1	2 10000166	☐ Change	Addition	
NAM:	DAVID, SLOAN		1.2 NAME	EDWAR	DLESSINGE INDISTOURT TON BLACK,	r ANT 317		
STREET ADDRESS	2515 N.E. 1ST COURT #210		1 3 STREET ADD	DHESS 2515 N	The A B C Acus	C/ 23486		
City - St - Zip Title	BOYNTON BCH, FL 00000 PDVD	DELETE	1.4 CITY-ST-Z 2.1 TITLE	PD	IN ISERTA,	Change	Addition	
NAME	BARDEN, HORALD		2.2 NAME	10		£ ondingo		
STREET ADDRESS	2515 N.E 1ST COURT #203		2.3 STREET ADD	NRESS				
CITY-ST-ZIP	BOYNTON BCH, FL 00000		2 4 CITY - ST - Z					
TITLE	VVD	DELETE	3.1 TITLE	Ð	······	Change	☐ Addition	
NAME	KALMER, SAMUEL		3.2 NAME	_				
STREET ADDRESS	2515 N.E. 1ST COURT #314		3.3 STREET ADO	DRESS				
CHTY-ST-ZIP	BOYNTON BCH, FL 00000		3.4. CITY - ST-7	IP .				
THLE	D	□DELETE	4.1 TITLE	-/- /	MOVO	Change	Addition	
NAME	GALLY, ALBERT		4. 2 NAME	HARR	Y KADIN N. IL ISC C		11.00	
STREET ADDRESS	2515 NE 1 CT #110		4.3 STREET ADD	DRESS 2515	N. IL / SI CI	PURT THAT	710	
CITY-ST-ZIP	BOYNTON BCH FL		4.4 CITY - ST - Z	P BOYNT	ON BEACH, CO	<u>L. 33438</u>		
TITLE	D .	DELETE	5.1 TITLE	,	•	Change	☐ Addition	
NAME	LILLE, WILLIAM		5 2 NAME					
STREET ADDRESS	2515 NE 1ST CT		5.3 STREET ADD	į				
CITY - ST - ZIP	BOYNTON BCH, FL 00000	Porter	5.4 CITY-ST-Z				T Address.	
TITLE	VD	DELÉTE	6.1 TITLE	"\mathcal{D}"		Change	Addition	
NAME	KASKY, RICHARD		6.2 NAME					
STREET ADDRESS	2515 NE 1ST CT		6.3 STREET ADI	1				
CITY-SI-ZIP 14. Lido hereb	BOYNTON BCH, FL 00000 by certify that the information supplied y	vith this filing is voluntarily fur	64 City-St-Z		ion stated in Section 119 (07/3V/N Florida Statu	utes I further	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Description of the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that I am and accurate and that my signature shall have the same legal effect as if made under oath; that I am a private of the corporation of the corporation of the corporation of the certific that I am a corporation of the corporation of the corporation of the certific that I am a corporation of the corporati

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