## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

720833

(3)

VILLAGE ROYALE GREENBRIAR ASSOCIATION, INC.

Principal Place of Business Mailing Address					⊣	-{				
										•
2515 N.E. 1ST COURT APT 317		2515 N.E. 1ST COURT APT 317								
BOYNTON BCH FL 33435		BOYNTON BCH FL 33435-2018								
US		US		3.	Date Incorporated or Qualified 04/30/1971	За.	Date of Last R 01/25/19	leport <b>96</b>		
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number			1A	pplied For	
21		26	26			59-4461404			N	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5.	Certificate of Status Desired			Additional	
22		[27]				and high which			equired	
City & State		City & State			6.	Election Campaign Financing	, — Aaraa			
<b>23</b> Z <sub>i</sub> p	<b>28</b>	Country				Trust Fund Contribution	<u> </u>		to Fees	
24	Country 25	29	30			8.	This corporation has liability for Florida Statutes	Intangio Yes	e tax under s □ No	. 199.032,
	9. Name and Address of Current		1001		<del></del>	10.	. Name and Address of New R			
	***************************************			91 i	Name				**************************************	
VRG OW	NERS LEAGUE INC		-	32 5	Stroot Ad	drace /F	P.O. Boy Number is Not Assents	blo)	<del></del>	<del></del>
2505 NE 2ND COURT					82 Street Address (P.O. Box Number is Not Acceptable)					
BOYNTO	ON BEACH FL 33435		[8	33	-					
,			1	34 (	City				. 85 Zip	Code
					•			F		
11. Pursuant office or i	to the provisions of Sections 617.0502	and 617.1508, Florida Statu of Florida, Such change was	ites, the abo	by th	named co	orporatio	on submits this statement for the	purpose	of changing it	Is registered
agent. I a	registered agent, or both, in the State of im familiar with, and accept the obligat	ions of, Section 617.0503, F	lorida Statu	tes.	10 00 por	anon y	board of unociois. The bby door	ibi nio mi	spontinont as	registered
SIGNATURE Signature, typed or printed name of registered agent and life if applicable (NOTE: Registered Agent signature required when reinstating)  DATE										
12.	Signature, typed or printed name of registered agen OFFICERS AND		TE: Registered :	Agent s	signature rec		n reinstating) ADDITIONS/CHANGES TO OFFI	DATE CEDC A		20 10 10
TITLE	T	DELETE	1.1 TITL	F	Т			*** ******		Addition
NAME	LESSINGER, EDWARD			1.2 NAME		340	SNE / SI COURT			- Nacion
STREET ADDRESS	ACAC MIC ACT COMEST ADT AAT			1.3 STREET ADDRESS			5 N.E / SI COURT	apt 2	-/ Y	
CITY-ST-ZIP	BOYNTON BEACH FL		1.4 CITY-ST-ZIP		Boy	NTON BRACH, FL 3	341	سم		
TITLE	PD DELETE			2.1 TITLE		VP	NTON BRACH, FL		Change	Addition
NAME	BARDEN, HORALD		2.2 NAM	Œ		TOX	YARAZZU, FrANK IN R/I COURT K YNTON BEACU, PL 33			
STREET ADDRESS	2515 N.E 1ST COURT #203		2.3 STREET ADDRESS		> 511	UN.R/E COURT K	418			
CITY-ST-ZIP	BOYNTON BCH, FL 00000	^	2. 4 CITY-ST-ZIP		ZIP	1307	YNTO N BEACH PL 33	435		
TITLE	D DELETE		3.1 TITL	3.1 TITLE				<del> </del>	Change	Addition
NAME	KALMER, SAMUEL	KALMER, SAMUEL		3.2 NAME						1000
STREET ADDRESS	2515 N.E. 1ST COURT #314		3.3 STR	3.3 STREET ADDRESS			•			. :
CITY-ST-ZIP	BOYNTON BCH, FL 00000		3.4. CIT	3.4. CITY-ST-ZIP						
TITLE	D			4.1 TITLE					Change	Addition
NAME	GALLY, ALBERT	•		4. 2 NAME					•	
STREET ADDRESS	2515 NE 1 CT #110		4.3 STR	EET AD	DRESS					
CITY-ST-ZIP	BOYNTON BCH FL		4.4 City	4.4 CITY-ST-ZIP						
TITLE	D	DELETE	5.1 TITL	5.1 TITLE					L Change	Addition
NAME	LILLE, WILLIAM			5.2 NAME						
STREET ADDRESS	2515 NE 1ST CT		5.3 STR	EET AD	DRESS					
CITY-ST-ZIP	BOYNTON BCH, FL 00000	1 1 pr. re-	5.4 CITY		ZIP					
THTLE	_			6.1 TITLE					L. Change	Addition
NAME	KASKY, RICHARD		6.2 NAN							
STREET ADDRESS	2515 NE 1ST CT		6.3 STR							
CITY-ST-ZIP	BOYNTON BCH, FL 00000 by certify that the information supplied	with this filing class not such	6.4 CITY			od in Pa	notion 110 07/2V/II Florida Otatia	التعالم الم	or partification	1ho
i informatic	on indicated on this annual report or su	polemental annual report is:	true and ac	:CUrai	te and th	ia vm ta	ionature shall have the same led	al effect	es if made un	der oath: that l
l am an c	fficer or director of the corporation or t in Block 12 or Block 13 if changed, or	he receiver or trustee embo	wered to ex	ecute	e this rep	ort as re	equired by Chapter 617, Florida	Statutes;	and that my r	name
		4					i /			(ST) / /

**FILED** 

Feb 12 1997 8:00am

Secretary of State