2006 ~~NOT-FOR-PROFIT~~ CORPORATION ANNUAL REPORT (AR)

FILED
Mar 27, 2006 8:00 am
Secretary of State

03-27-2006 90264 047 ****61.25

DOCUMENT # 720833

1. Entity Name

VILLAGE ROYALE GREENBRIAR ASSOCIATION , INC.

Principal Place of Business	Mailing Address
2515 N.E. 1ST COURT BOYNTON BCH FL 33435 US	2515 N.E. 1ST COURT ~~APT 906~~ BOYNTON BCH FL 33435 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc. Apt 313	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

1st-MOORE CR2E037 (10/05)

4. FEI Number NO-T APPLICABLE — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
VRG OWNERS LEAGUE INC 2505 NE 2ND COURT BOYNTON BEACH FL 33435	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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 Harriet Aliperta · HARRIET ALIPERTA 3/16/06

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25 Due By May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE P NAME AMATO, RUTH STREET ADDRESS 2515 NE 1ST CT #214 CITY-ST-ZIP BOYNTON BEACH FL 33435	☒ Delete	TITLE President NAME Peter WALDMAN STREET ADDRESS 2515 NE 1st Ct # 208 CITY-ST-ZIP Boynton Beach, FL. 33435	☒ Change ☐ Addition
TITLE VP/T NAME ALIPERTA, HARRIET STREET ADDRESS 2515 NE 1ST CT #313 CITY-ST-ZIP BOYNTON BEACH FL 33435	☒ Delete	TITLE Aliperta, Harriet, Treas NAME STREET ADDRESS 2515 NE 1st Ct 313 CITY-ST-ZIP Boynton Beach, FL. 33435	☒ Change ☐ Addition
TITLE D NAME FIRPO, DAVE STREET ADDRESS 2515 NE FIRST CT APT 110 CITY-ST-ZIP BOYTON BEACH FL 33435	☒ Delete	TITLE V.P. NAME SAMUEL MARKS STREET ADDRESS 2620 N.E 1st Ct #118 CITY-ST-ZIP Boynton Beach, FL 33435	☒ Change ☐ Addition
TITLE D NAME VINCEFF, MARTIN STREET ADDRESS 2515 NE 1ST CT #307 CITY-ST-ZIP BOYNTON BCH FL 33435	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE D NAME GROSS, EMILY STREET ADDRESS 2515 NE 1ST CT #101 CITY-ST-ZIP BOYNTON BEACH FL 33435	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE S NAME GOLDSTEIN, BARBARA STREET ADDRESS 2515 NE FIRST COURT #313 CITY-ST-ZIP BOYNTON BEACH FL 33435	☒ Delete	TITLE Director NAME CHAMOFF, Stanley STREET ADDRESS 2515 NE 1st Ct #310 CITY-ST-ZIP Boynton Beach, FL. 33435	☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

SIGNATURE: Harriet Aliperta HARRIET ALIPERTA 3/16/06 561-735-9391