


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 19, 2007 8:00 am**  
**Secretary of State**

02-19-2007 90054 042 \*\*\*\*61.25

|   |         |   |          |
|---|---------|---|----------|
| DOCUMENT # 720833   |         |  |          |
| 1. Entity Name<br>VILLAGE ROYALE GREENBRIAR ASSOCIATION, INC.   |         |   |          |
| Principal Place of Business<br>2515 N.E. 1ST COURT<br>APT 313<br>BOYNTON BCH FL 33435<br>US   |         | Mailing Address<br>2515 N.E. 1ST COURT<br>APT 313<br>BOYNTON BCH FL 33435<br>US   |          |
| 2. Principal Place of Business - No P.O. Box #<br><i>Same</i>   |         | 3. Mailing Address  |          |
| Suite, Apt. #, etc.   |         | Suite, Apt. #, etc.   |          |
| City & State  |         | City & State  |          |
| Zip   | Country | Zip   | Country  |
| 6. Name and Address of Current Registered Agent<br><br>VRG OWNERS LEAGUE INC<br>2505 NE 2ND COURT<br>BOYNTON BEACH FL 33435   |         | 7. Name and Address of New Registered Agent                                       |          |
| Name  |         | Name  |          |
| Street Address (P.O. Box Number is Not Acceptable)  |         | 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 _____<br><small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when registering)</small>   |         |   |          |



1st MOORE CR2E037 (10/06)

|   |                                       |
|---|---------------------------------------|
| 4. FEI Number<br><b>NO-T APPLICABLE</b> | Applied For<br>Not Applicable         |
| 5. Certificate of Status Desired        | <b>\$8.75</b> Additional Fee Required |

|  |   |                                    |  |
|--|---|------------------------------------|--|
| <b>FILE NOW: FEE IS \$61.25</b><br><b>Due By May 1, 2007</b> | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> | <b>\$5.00</b> May Be Added to Fees | <b>Make Check Payable to Florida Department of State</b> |
|--|---|------------------------------------|--|

| 10. OFFICERS AND DIRECTORS |  | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 |   |
|----------------------------|--|---|---|
| TITLE<br>P                 | <input type="checkbox"/> Delete<br>WALDMAN, PETER<br>2515 NE 1ST CT #208<br>BOYNTON BEACH FL 33435           | TITLE<br>D  | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition<br>BARBARA Goldstein<br>2515 N. E 1st Ct # 311<br>Boynton Beach, FL 33435  |
| TITLE<br>T                 | <input type="checkbox"/> Delete<br>ALIPERTA, HARRIET<br>2515 NE 1ST CT #313<br>BOYNTON BEACH FL 33435        | TITLE<br>D  | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition<br>DORIS SCHNAKENBERG<br>2515 N.E. 1st Ct #316<br>Boynton Beach, FL. 33435 |
| TITLE<br>VP                | <input type="checkbox"/> Delete<br>MARKS, SAMUEL<br>2620 NE 1ST CT #118<br>BOYNTON BEACH FL 33435            | TITLE<br>D  | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition<br>MARVIN Goldberg<br>2515 N. E. 1st Ct #401<br>Boynton Beach, FL. 33435   |
| TITLE<br>D                 | <input checked="" type="checkbox"/> Delete<br>VINCEFF, MARTIN<br>2515 NE 1ST CT #307<br>BOYNTON BCH FL 33435 | TITLE<br>D  | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition<br>EBNER ALSEN<br>2515 NE 1st Ct #407<br>Boynton Beach, FL. 33435          |
| TITLE<br>D                 | <input checked="" type="checkbox"/> Delete<br>GROSS, EMILY<br>2515 NE 1ST CT #101<br>BOYNTON BEACH FL 33435  | TITLE<br>D  | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition<br>MARC Bender<br>2515 N.E 1st Ct #405<br>Boynton Beach FL. 33435          |
| TITLE<br>D                 | <input type="checkbox"/> Delete<br>CHAMOFF, STANLEY<br>2515 NE 1ST CT #310<br>BOYNTON BEACH FL 33435         | TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> 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, Treas. Date: 2/6/07 Telephone: 561-735-9391