

**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 20, 2003 8:00 am**  
**Secretary of State**

03-20-2003 90091 039 \*\*\*\*61.25

**DOCUMENT # 720833**



1. Entity Name  
**VILLAGE ROYALE GREENBRIAR ASSOCIATION, INC.**

Principal Place of Business  
**2515 N.E. 1ST COURT  
APT 317  
BOYNTON BCH FL 33435  
US**

Mailing Address  
**2515 N.E. 1ST COURT  
~~APT 317~~ 306  
BOYNTON BCH FL 33435  
US**

2. Principal Place of Business  
**SAME AS ABOVE**

3. Mailing Address  
**SAME**

Suite, Apt. #, etc.  
**306**

City & State  
**BOYNTON BEACH**

City & State

Zip  
**33435**

Country  
**W. Palm Beach**

Country  
**Same**



CHECK HERE IF MAKING CHANGES

4. FEI Number **59-4461404**

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

**VRG OWNERS LEAGUE INC  
2505 NE 2ND COURT  
BOYNTON BEACH FL 33435**

7. Name and Address of New Registered Agent

Name  
**N/A**

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  
*[Signature]*

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

DATE  
**2/10/03**

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

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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD WALDMAN, PETER 2515 NE FIRST COURT #208 BOYNTON BEACH FL 33435</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD YOUNG, HERBERT 2515 NE FIRST COURT #306 BOYNTON BEACH FL 33435</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S COLLUCCI, JEAN 2515 NE FIRST COURT #209 BOYNTON BEACH FL 33435</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP BODWELL, TED 2515 NE 1ST CT 308 BOYNTON BCH FL 33435</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D ALSEN, ESTHER 2515 NE 1ST CT #407 BOYNTON BEACH FL 33435</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D GOLDSTEIN, MORTON 2515 NE FIRST COURT #313 BOYNTON BEACH FL 33435</b> <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Pres WILLIAM MILLER #108 2515 NE 1ST CT BOYNTON BEACH, FL 33435</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SAME</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DAVE DRPO ADDRESS SAME APT #110</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP LEON SLOAPE SAME ADDRESS APT #115</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SAME</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SAME</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 life empowered.

SIGNATURE: *[Signature]* **SIGNATURE REQUIRED**

**2/10/03 5613367001**

CR2E037 (10/02)