

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722793

FILED  
Sep 06, 2005  
Secretary of State

Entity Name: VILLAGE ROYALE EMERALD GREEN ASSOCIATION, INC.

**Current Principal Place of Business:**

2600 N.E. FIRST LANE  
ROOM 300  
BOYNTON BEACH, FL 33435

**New Principal Place of Business:**

**Current Mailing Address:**

2600 N.E. FIRST LANE  
ROOM 300  
BOYNTON BEACH, FL 33435

**New Mailing Address:**

FEI Number: 59-1546353      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

STEPNER, ALLEN  
2600 NE 1ST LANE  
BOYNTON BEACH, FL 33435      US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: DP      ( ) Delete  
Name: STEPNER, ALLEN B  
Address: 2600 N E 1ST LN  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: DVS      ( ) Delete  
Name: STEPNER, ALLEN B  
Address: 2600 NE 1ST LANE  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: DT      ( ) Delete  
Name: ROTH, CONNIE  
Address: 2600 NE 1ST LANE  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: D      ( ) Delete  
Name: DOLITTLE, ROBERT  
Address: 2600 N.W. 1 LANE  
City-St-Zip: BOYNTON BEACH, FL 33435

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALLEN STEPNER

DP

09/06/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date