

FILE NOW: FILING FEE IS \$61.25

FILED

Jan 15 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 725236 (4)

1. Corporation Name

VILLAGE ROYAL GREENHILL ASSOCIATION, INC.



Principal Place of Business

Mailing Address

300 N E 26 AVENUE
#414
BOYNTON BEACH FL 33435
US300 N E 26 AVENUE
#414
BOYNTON BEACH FL 33435-2032
US3. Date Incorporated or Qualified
01/10/19733a. Date of Last Report
02/19/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

VRG OWNER'S LEAGUE INC
2505 NE 2ND CT
BOYNTON BEACH FL 33435

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature: typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	T	<input type="checkbox"/> DELETE
NAME	JACOBS, JOAN	
STREET ADDRESS	300 N.E. 26TH AVE.	
CITY-ST-ZIP	BOYNTON BEACH, FL 00000	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	JACOBS, JULIUS	
STREET ADDRESS	300 NE 26TH AVENUE	
CITY-ST-ZIP	BOYNTON BEACH, FL 00000	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	BELKIN, JACK	
STREET ADDRESS	300 NE 26TH AVE #213	
CITY-ST-ZIP	BOYNTON BEACH, FL 00000	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	BEIN, ANN	
STREET ADDRESS	300 NE 26TH AVE #403	
CITY-ST-ZIP	BOYNTON BEACH, FL 00000	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	BUFF, ANITA	
STREET ADDRESS	300 NE 26TH AVENUE	
CITY-ST-ZIP	BOYNTON BEACH, FL 00000	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	MORRIS ARNOWITZ	
STREET ADDRESS	300 N.E. 26TH AVE.	
CITY-ST-ZIP	BOYNTON BEACH, FL 33435	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Julius Jacobs, Pres.

1/7/97

561-792-9444

CR2E037 (9/96)