


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 22, 2005 8:00 am
Secretary of State

04-07-2005 90036 007 ****61.25

DOCUMENT # 725236 1. Entity Name VILLAGE ROYAL GREENHILL ASSOCIATION, INC.					
Principal Place of Business 300 N E 26 AVENUE #412 BOYNTON BEACH FL 33435 US			Mailing Address 300 N E 26 AVENUE #414 BOYNTON BEACH FL 33435 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 59-1537162	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent STORCH, GERRY 300 NE 26TH AVENUE BOYNTON BEACH FL 33435				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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 _____ (NOTE: Registered Agent signature required when renewing) DATE _____					
FILE NOW: FEE IS \$61.25 Due By May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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 NAME STREET ADDRESS CITY- ST- ZIP	PTD STORCH, GERRY 300 NE 26TH AVENUE BOYNTON BEACH FL 33435	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	Treasurer - Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD PAVON, ELAINE 300 NE 26TH AVENUE BOYNTON BEACH FL 33435	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	President - Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D CAPLAN, IRVING 300 NE 26TH AVE #201 BOYNTON BEACH FL 33435	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VPD BARR, MANNY 300 NE 26 AVE BOYNTON BEACH FL 33435	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	SD MASSE, RICHARD 300 NE 26TH AVE BOYNTON BEACH FL 33435	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	Secretary - Director Myra Silverman 300 NE 26 Ave BOYNTON BEACH FL 33435 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	<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 like empowered.					
SIGNATURE: <u>Elaine Pavar</u> 4/18/05					