

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726348

FILED  
Feb 21, 2011  
Secretary of State

**Entity Name:** GREENSWARD VILLAGE ONE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

745 GREENSWARD COURT  
DELRAY BEACH, FL 33445 US

**New Principal Place of Business:**

**Current Mailing Address:**

745 GREENSWARD COURT  
DELRAY BEACH, FL 33445 US

**New Mailing Address:**

FEI Number: 59-1562476

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DICKER, KRIVOK & STOLOFF, P.A.  
1818 AUSTRALIAN AVENUE, SOUTH  
WEST PALM BEACH, FL 33409 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: P/D  
Name: ATKINSON, PAMELA  
Address: 900 GREENSWARD LANE #G205  
City-St-Zip: DELRAY BEACH, FL 33445

Title: V/D  
Name: COHEN, WILLIAM  
Address: 900 GREENSWARD LANE # G107  
City-St-Zip: DELRAY BEACH, FL 33445

Title: T/D  
Name: COHEN, WILLIAM  
Address: 900 GREENSWARD LANE # G107  
City-St-Zip: DELRAY BEACH, FL 33445

Title: S/D  
Name: GORGE, NANCY  
Address: 800 GREENSWARD COURT # I-106  
City-St-Zip: DELRAY BEACH, FL 33445

I hereby 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 all other like empowered.

SIGNATURE: PAMELA ATKINSON

P

02/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date