

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735058

FILED
Feb 18, 2009
Secretary of State

Entity Name: VGH ASSOCIATION, INC.

Current Principal Place of Business:

2860 S.W. 14TH STREET, #14
BOYNTON BEACH, FL 33426 US

New Principal Place of Business:

2860 S.W. 14TH STREET
#14
BOYNTON BEACH, FL 33426 US

Current Mailing Address:

P.O. BOX 1444
BOYNTON BEACH, FL 334251444 US

New Mailing Address:

FEI Number: 59-1723906 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

APERAVICH, MARY
2860 SW 14 STREET #14
BOYNTON BEACH, FL 33426 US

Name and Address of New Registered Agent:

APERAVICH, MARY
2860 SW 14 STREET
#14
BOYNTON BEACH, FL 33426 US

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:

02/18/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: ST () Delete
Name: LEFLER, BETH
Address: 2820 S.W. 14TH ST., #24
City-St-Zip: BOYNTON BEACH, FL 33426

Title: PDT () Delete
Name: PERMUY, BILL
Address: 2840 S.W. 14TH STREET, #20
City-St-Zip: BOYNTON BEACH, FL 33426

Title: T () Delete
Name: APERA VICH, MARY
Address: 2860 S.W. 14TH ST., #14
City-St-Zip: BOYNTON BEACH, FL

Title: VP () Delete
Name: WALL, APRIL
Address: 2515 S.W. 13TH STREET
City-St-Zip: BOYNTON BEACH, FL 33426

Title: SC () Delete
Name: ROUKES, MARGARET
Address: 2860 SW 14TH ST #17
City-St-Zip: BOYNTON BEACH, FL 33426

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:

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MARY APERAVICH

TREA

02/18/2009

Electronic Signature of Signing Officer or Director

Date