## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## **DOCUMENT # 740021**

1. Corporation Name

VILLAGE GREEN OF BRADENTON CONDOMINIUM, SECTION 8, ASSOCIATION, INC.

гипсіраі			riace or	Dusiliess		
8	AVE	&	VILLAGE	GREEN	P	

Mailing Address

2a. Mailing Address

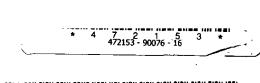
**BRADENTON FL 34210** 

2. Principal Place of Business

5726 CORTEZ WEST, SUITE 140 **BRADENTON FL 34210** 

## **FILED** May 03, 1999 8:00 am § Secretary of State

05-03-1999 90076 016 \*\*\*\*61.25





3. Date Incorporated or Qualifed

21		26			08/30/1977				
Suite, Apt.	#. etc.	Suite, Apt. #, etc.			4. FEI Number		Applied For		
22	•	27			59-1890702		lot Applicable		
City & Stat	e	City & State	· · · · · · · · · · · · · · · · · · ·		5. Certifcate of Status Desired		Additional		
23		28					Required		
Zip	Country	Zip	Country	•	6. Election Campaign Financing Trust Fund Contribution		May Be to Fees		
24	25]		30		10. Name and Address of New Registered		101663		
	9. Name and Address of Current	Registered Agent	81	Name	tat Hillio file Language at Healt Health	- 184			
	R, RONALD H.		82	Street Add	Street Address (P.O. Box Number is Not Acceptable)				
2611 47TH ST. WEST									
RHAUENI	ON FL <sup>©</sup> 34209 <sup>as M</sup> - 35€0 - 35≦6-4		L			11			
	G. C.		84	City	FL	85   Zip	Code		
<b>11</b> D	ANAL CHARLES OF CONTINUE CAT DECC	and 617 1508 Florida Statuto	s the above	L e-named com	poration submits this statement for the purpose of	changing i	ts registered		
office or a	egistered agent, or both, in the State o	f Florida. Such change was au	ithorized by	the corporation	ion's board of directors. I hereby accept the appoi	ntment as	registered		
agent. I a	m familiar with, and accept the obligation	ons or, Section 617.0503, Flori	ida Statutes	i.					
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTF-	Registered Arrei	nt signature require	ed when reinstating) DATE		·		
12.	OFFICERS AND		13.	¥	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECT	ORS IN 12		
TITLE	TD	☐ DELETE	1.1 TITLE			Change	Addition		
NAME	THOMAS, JACK		1.2 NAME						
STREET ADDRESS			1.3 STREE	TADDRESS					
CITY-ST-ZIP	BRADENTON, FL 00000		1.4 CITY-S	T-ZIP					
TITLE	PD	☐ DELETE	2.1 TITLE			Change	Addition		
NAME	MARTENSON, HERBERT		2.2 NAME						
STREET ADDRESS			2.3 STREE	TADDRESS					
CITY-ST-ZIP	BRADENTON, FL 00000		2.4 CITY-S	ST-ZIP					
TITLE	D	☐ DELETE	3.1 TITLE			Change	Addition		
NAME	AGIUS, MIKE		3.2 NAME						
STREET ADDRESS			3.3 STREE	TADORESS					
CITY-ST-ZIP	BRADENTON, FL 00000		3.4. CITY-5	ST-ZIP					
TITLE	SD	☐ DELETE	4.1 TITLE			Change	Addition		
NAME	BANSEN, DONALD		4. 2 NAME						
STREET ADDRESS			4.3 STREE	T ADDRESS					
CITY-ST-ZIP	BRADENTON, FL 00000		4.4 CITY-S	T-ZIP			<u></u>		
TITLE	VD	☐ DELETE	5.1 TITLE			Chang	e Addition		
NAME	DAUMAN, ALMA		5.2 NAME						
STREET ADDRESS	7401 8TH AVE W.		5.3 STREE	TADDRESS					
CITY-ST-ZIP	BRADENTON FL		5.4 CITY-S	T-ZIP			<u>-</u>		
TITLE	D	DELETE	6.1 TITLE			Change	B Addition		
NAME	REED, GLENN	*	6.2 NAME						
STREET ADDRESS	7402 8TH AVE W		6.3 STREE	TADDRESS					
CITY-ST-ZIP	BRADENTON FL		6.4 CITY-S	T-ZIP					

14. 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 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, with all other like empowered.

SIGNATURE: