


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 14, 2007 8:00 am**  
**Secretary of State**

05-14-2007 90071 031 \*\*\*\*61.25

|   |  |   |  |   |  |
|---|--|---|--|---|--|
| <b>DOCUMENT # 740021</b><br>1. Entity Name<br><b>VILLAGE GREEN OF BRADENTON CONDOMINIUM,<br/>SECTION 8, ASSOCIATION, INC.</b>   |  |   |  |    |  |
| Principal Place of Business<br><b>8 AVE &amp; VILLAGE GREEN PK<br/>BRADENTON FL 34210<br/>US</b>  |  |   | Mailing Address<br><b>5726 CORTEZ WEST, SUITE 140<br/>#140<br/>BRADENTON FL 34210</b>  |   |  |
| 2. Principal Place of Business - No P.O. Box #<br><br>Suite, Apt. #, etc.   |  | 3. Mailing Address<br><br>Suite, Apt. #, etc.                                       |  |   |  |
| City & State<br><br>Zip      Country  |  | City & State<br><br>Zip      Country  |  | 4. FEI Number<br><b>59-1890702</b>  |  |
| 5. Certificate of Status Desired <input type="checkbox"/>   |  | <b>\$8.75 Additional Fee Required</b>   |  |   |  |
| 6. Name and Address of Current Registered Agent<br><br><b>KROEGER, RONALD H.<br/>2611 47TH ST. WEST<br/>BRADENTON FL 34209</b>  |  |   | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City <b>FL</b> Zip Code |   |  |
| 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 _____<br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>  |  |   |  |   |  |
| <b>FILE NOW: FEE IS \$61.25<br/>Due By May 1, 2007</b>  |  | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> |  | <b>\$5.00 May Be Added to Fees</b>  |  |
| <b>Make Check Payable to<br/>Florida Department of State</b>  |  |   |  |   |  |
| <b>10. OFFICERS AND DIRECTORS</b>   |  |   | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP  | PD<br>ENSING, DUANE<br>7311-8 AVE. W<br>BRADENTON FL 34209           | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP   | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP  | TD<br>CHENOWETH, DIANA<br>7311-7 AVE W<br>BRADENTON FL 34209         | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP   | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP  | D<br>BANSEN, DONALD<br>7405 8TH AVE. WEST<br>BRADENTON FL            | <input checked="" type="checkbox"/> Delete  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP   | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition<br><i>D<br/>DRAINA, ALBERT<br/>7410-8 AVE W<br/>BRADENTON FL 34209</i> |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP  | VD<br>PARKER, LINDA<br>7306-8 AVE W<br>BRADENTON FL 34209            | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP   | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP  | D<br>SEDDON, ELAINE<br>802 VILLAGE GREEN PKWY.<br>BRADENTON FL 34209 | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP   | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP  | SD<br>AGIUS, EVALINE<br>7401-7TH AVE WEST<br>BRADENTON FL 34209      | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>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 exemptions contained in Section 119, 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. |  |   |  |   |  |
| <b>SIGNATURE:</b> <i>Linda Parker</i> <b>LINDA PARKER</b> <b>3-15-07</b> <b>941-792-7873</b>  |  |   |  |   |  |



1st MOORE      CR2E037 (10/06)