

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

**FILED**  
**Feb 23, 2005 8:00 am**  
**Secretary of State**

02-23-2005 90067 030 \*\*\*\*61.25

**DOCUMENT # N00000003547**

1. Entity Name

**THE VILLAGE AT VERONA LAKES HOMEOWNERS  
ASSOCIATION, INC.**



Principal Place of Business

% V & L PROPERT MGMT INC  
203  
POMPANO BEACH FL 33065

Mailing Address

% V & L PROPERT MGMT INC  
203  
POMPANO BEACH FL 33065

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1025154

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**



1st MOORE

CR2E037 (10/04)

6. Name and Address of Current Registered Agent

**CALDERAZZO, JAMES**  
**% V & L PROPERTY MGMT INC**  
**10191 W. SAMPLE RD SUITE 203**  
**POMPANO BEACH FL 33065**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2005**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☒ Delete  
NAME DRUCKMAN, ELLEN  
STREET ADDRESS 301 W CAMINO GARDENS BLVD, #200  
CITY-ST-ZIP BOCA RATON FL 33432

TITLE VPD ☒ Delete  
NAME KORN, DANIEL  
STREET ADDRESS 301 W CAMINO GARDENS BLVD, #200  
CITY-ST-ZIP BOCA RATON FL 33432

TITLE TSD ☒ Delete  
NAME TREMBLAY, MARIO  
STREET ADDRESS 301 W CAMINO GARDENS BLVD, #200  
CITY-ST-ZIP BOCA RATON FL 33432

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Change ☐ Addition  
NAME Marshall Gross  
STREET ADDRESS 8174 Bellagio Lane  
CITY-ST-ZIP ~~Boynton Beach, FL 33432~~

TITLE VP ☒ Change ☐ Addition  
NAME Jay Friedman  
STREET ADDRESS 9863 Porta Leona Lane  
CITY-ST-ZIP Boynton Beach, FL 33432

TITLE TD ☐ Change ☒ Addition  
NAME Alex Santoro  
STREET ADDRESS 8175 Bellagio Lane  
CITY-ST-ZIP Boynton Beach, FL 33432

TITLE SD ☐ Change ☒ Addition  
NAME Nancy Lipman  
STREET ADDRESS 8139 Bellagio Lane  
CITY-ST-ZIP Boynton Beach, FL 33432

TITLE Dir. ☐ Change ☒ Addition  
NAME Daniel Korn  
STREET ADDRESS 9699 Lago Drive  
CITY-ST-ZIP Boynton Beach, FL 33432

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*Marshall W Gross* **MARSHALL W GROSS** 2-16-05 521-736-3909

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #