2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 25, 2008 8:00 am Secretary of State DOCUMENT # N00000003547 1. Entity Name 02-25-2008 90071 009 ****61.25 THE VILLAGE AT VERONA LAKES HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 10191 W. SAMPLE RD. 10191 W. SAMPLE RD. CORAL SPRINGS FL 33065 CORAL SPRINGS FL 33065 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apr. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/07) City & State City & State 4. FEI Number Applied For 65-1025154 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JAME CALDERAZZO C/O J&L PROP. MGMT. Street Address (P.O. Box Number is Not Acceptable) 10191 W. SAMPLE DR. #203 CORAL SPRINGS FL 33065 City 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 Fiorida. I am familiar with, and accept the obligations of registered agent SIGNATURE (NOTE: Registered Agont signature required when reinstating) Signature, lyped or printed name of registered agent and title if approache. FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2008 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 ____Delate TITLE Change DAVIS, KARL NAME Joseph Kessler NAME 9689 PORTA LEONA LANE STREET ADDRESS 9693 Lago Drive STREET ADDRESS **BOYNTON BEACH FL 33437** CITY-ST-ZIP CITY-ST-ZIP Boynton Bub TITLE Delate 🖵 **™** Change Addition Chris Schaub GROSS, MARSHALL NAME NAME 9681 Lago Drive 8174 BELLAGIO LN STREET ADDRESS STREET ADDRESS **BOYTON BEACH FL 3347** City - ST - 7iP CITY-ST-ZIP Boynton Bch, TITLE Delete TITLE Q.T ☐ Addition SEIDEN, ROBERT Paul Mariano NAME NAME 8085 BRINNLEA DR. STREET ADDRESS 9869 Porta Leona Lane STREET ADDRESS **BOYNTON BEACH FL 33437** CITY-ST-7IP CITY-ST-ZIP Boynton Behi TITLE Delete TITLE ☐ Addition NAME LIPMAN, NANCY Kim Dilorenzo NAME 8139 BELLAGIO LANE STREET ADDRESS STREET ADDPESS 9656 Lago Drive CITY-ST-ZIP **BOYNTON BEACH FL 33432** CITY-ST-ZIP Boyaton Bd. HEL (Change Delete Control Addition MALFITANO, CLAIRE Jason Jabenga NAME 9974 LAGO DRIVE STREET ADDRESS 9692 Lago Drive STREET ADDRESS **BOCA RATON FL 33433** CITY+ST-ZIP CITY-ST-ZiP Boynton Buh TOTLE ☐ Dalete TITLE □ Change Addition NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZP

SIGNATURE:

CITY-ST-ZIP

INATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/1/08

FILED