

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 19, 2008 8:00 am**  
**Secretary of State**

02-19-2008 90015 011 \*\*\*\*61.25

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                           |                                                                                     |                                                                                                                       |                                                                                                                                                        |                                                                              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|-------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| <b>DOCUMENT # N38013</b><br>1. Entity Name<br><b>VERO PALM ESTATES HOMEOWNER ASSOCIATION, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                           |                                                                                     |                                                                                                                       |                                                                       |                                                                              |
| Principal Place of Business<br><b>1405 -82ND AVE<br/>SUITE 700<br/>VERO BEACH, FL 32966 US</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                           |                                                                                     | Mailing Address<br><b>1405 -82ND AVE<br/>SUITE 700<br/>VERO BEACH, FL 32966 US</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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                           | City & State                                                                        |                                                                                                                       | 02072008 Chg-NP CR2E037 (12/06)                                                                                                                        |                                                                              |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                           | Country                                                                             |                                                                                                                       | 4. FEI Number<br><b>65-0187731</b>                                                                                                                     |                                                                              |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                           |                                                                                     |                                                                                                                       | Applied For<br><input type="checkbox"/> Not Applicable                                                                                                 |                                                                              |
| 6. Name and Address of Current Registered Agent<br><br><b>TASILLO, JAMES A<br/>1405 82ND AVE<br/>LOT 239<br/>VERO BEACH, FL 32966</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                           |                                                                                     | 7. Name and Address of New Registered Agent<br><br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City |                                                                                                                                                        |                                                                              |
| 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.                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                           |                                                                                     | FL Zip Code                                                                                                           |                                                                                                                                                        |                                                                              |
| SIGNATURE _____ DATE _____<br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                           |                                                                                     |                                                                                                                       |                                                                                                                                                        |                                                                              |
| <b>Filing Fee is \$61.25<br/>Due by May 1, 2008</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                           | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> |                                                                                                                       | <b>\$5.00 May Be<br/>Added to Fees</b>                                                                                                                 |                                                                              |
| Make check payable to<br><b>Florida Department of State</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                           |                                                                                     |                                                                                                                       |                                                                                                                                                        |                                                                              |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                           |                                                                                     | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10                                                                 |                                                                                                                                                        |                                                                              |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | PD<br>CLEVELNAD, ROBERT J<br>1405 82ND AVE, # 129<br>VERO BEACH, FL 32966 | <input type="checkbox"/> Delete                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                        | D                                                                                                                                                      | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | VP<br>CUTLER, JACK<br>1405 82ND AVE # 168<br>VERO BEACH, FL 32966         | <input type="checkbox"/> Delete                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                        | PD                                                                                                                                                     | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | TD<br>TASILLO, JAMES A<br>1405 82ND AVE # 239<br>VERO BEACH, FL 32966     | <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>CULLEN, ANDREA R<br>1405 82ND AVE #54<br>VERO BEACH, FL 32966       | <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>BIRD, GEORGE<br>1405 82ND AVE # 154<br>VERO BEACH, FL 32966          | <input checked="" type="checkbox"/> Delete                                          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                        | VPD<br>JOYCE YARSAWICH<br>1405 82ND AVE LOT 245<br>VERO BEACH FL 32966<br><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |                                                                              |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | D<br>NELSON, JOHN<br>1405 82ND AVE # 154<br>VERO BEACH, FL 32966          | <input checked="" type="checkbox"/> Delete                                          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                        | D<br>SUSAN BROGAN<br>1405 82ND AVE LOT 156<br>VERO BEACH FL 32966<br><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition      |                                                                              |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: JAMES A. TASILLO</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                           |                                                                                     | <b>2-13-08 772 562-7795</b>                                                                                           |                                                                                                                                                        |                                                                              |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                           |                                                                                     | <small>Date Daytime Phone #</small>                                                                                   |                                                                                                                                                        |                                                                              |

# ATTACHMENT

40027416

2008 Not-For Profit Corporation Annual Report

Document #N38013

January 8, 2008

## Additional Board of Directors

D Chuck Dunlevy  
1405 82<sup>nd</sup> Ave Lot 66  
Vero Beach, FL 32966

D Wayne Ledder  
1405 82<sup>nd</sup> Ave Lot 41  
Vero Beach FL 32966

D Sandra Scott  
1405 82<sup>nd</sup> Ave Lot 68  
Vero Beach, FL 32966