FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 FEB 17 PM 3:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N39820 (8)

1. Corporation Name
THE VILLAGE ALLIANCE, INC.

Principal Place of Business	Mailing Address
21042 BUTCHERS HOLLER ESTERO FL 33928-2201	21042 BUTCHERS HOLLER ESTERO FL 33928-2201

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/04/1990
3a. Date of Last Report: 01/21/1994
4. FEI Number: 65-0220502 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21 20979 BLACKSMITH FORGE	26 20979 BLACKSMITH FORGE
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: ESTERO, FLORIDA	28 City & State: ESTERO FLORIDA
24 Zip: 33928 25 Country: LEE	29 Zip: 33928 30 Country: Lee

9. Name and Address of Current Registered Agent

CATZ, ROCHELLE Z.
13161 MCGREGOR BOULEVARD
ESTERO FL 33928

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D-S-T ☒ Change ☐ Addition
NAME	ZURCHER, TED	1.2 NAME	LEWIS, GERTRUDE
STREET ADDRESS	21155 BUTCHER'S HOLLER	1.3 STREET ADDRESS	20979 BLACKSMITH FORGE
CITY-ST-ZIP	ESTERO FL	1.4 CITY-ST-ZIP	ESTERO, FL. 33928
TITLE	D	2.1 TITLE	D-V-P ☒ Change ☐ Addition
NAME	SCHULTE, DICK	2.2 NAME	ANDERSON, MARK
STREET ADDRESS	21125 BUTCHER'S HOLLER	2.3 STREET ADDRESS	20731 ANDIRON PL.
CITY-ST-ZIP	ESTERO FL	2.4 CITY-ST-ZIP	ESTERO, FL. 33928
TITLE	VPD	3.1 TITLE	D-P ☒ Change ☐ Addition
NAME	ROSENTHAL, ARNIE	3.2 NAME	ROSENTHAL, ARNIE
STREET ADDRESS	20981 ANDIRON, FLORIDA	3.3 STREET ADDRESS	20981 ANDIRON PL.
CITY-ST-ZIP	ESTERO FL	3.4 CITY-ST-ZIP	ESTERO, FL. 33928
TITLE	DST	4.1 TITLE	D ☒ Change ☐ Addition
NAME	SIRI, GEORGE J	4.2 NAME	SIRI, GEORGE J.
STREET ADDRESS	21042 BUTCHERS HOLLER	4.3 STREET ADDRESS	21042 BUTCHERS HOLLER
CITY-ST-ZIP	ESTERO FL	4.4 CITY-ST-ZIP	ESTERO, FL. 33928
TITLE	DP	5.1 TITLE	D ☒ Change ☐ Addition
NAME	HARTMAN, SAM	5.2 NAME	RAWSON, MARTHA
STREET ADDRESS	20791 ANDIRON PL	5.3 STREET ADDRESS	20894 COUNTRY BARN DR.
CITY-ST-ZIP	ESTERO FL	5.4 CITY-ST-ZIP	ESTERO, FL. 33928
TITLE	D	6.1 TITLE	D ☒ Change ☐ Addition
NAME	BRUSH, GEORGE	6.2 NAME	GUHL, ALVA
STREET ADDRESS	21030 BUTCHER HOLLER	6.3 STREET ADDRESS	20810 PERSIMMON PL.
CITY-ST-ZIP	ESTERO FL	6.4 CITY-ST-ZIP	ESTERO FL. 33928

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: Gertrude Lewis GERTRUDE LEWIS S/T 3-1-95 (813) 947-1131
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0060240