

FILE NOW: FILING FEE IS \$61.25

FILED
Apr 20, 1999 8:00 am
Secretary of State

04-20-1999 90075 007 ****61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 727126

1. Corporation Name

VILLAS ON THE GREEN CONDOMINIUM ASSOCIATION INC

Principal Place of Business

717 US HWY ONE
PO BOX 3874
TEQUESTA FL 33469-0874

Mailing Address

717 US HWY ONE
PO BOX 3874
TEQUESTA FL 33469-0874



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

08/08/1973

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

59-1565256

Applied For
Not Applicable

City & State

City & State

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

Zip

Country

Zip

Country

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ECKLOF, ALAN M
717 U S 1
STE 602
JUPITER FL 33477

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME **VPS.**
SIMCIL, FRANK
STREET ADDRESS **717 U S 1, STE 305**
CITY-ST-ZIP **JUPITER FL 33477**

1.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **TREAS**
PACCA, ROBERT J
STREET ADDRESS **717 U S 1 STE 804**
CITY-ST-ZIP **JUPITER FL 33477**

1.2 NAME ☐ Change ☐ Addition

TITLE ☒ DELETE

NAME **D**
O'KEEFE, FRANK
STREET ADDRESS **717 US HWY 1, STE 107**
CITY-ST-ZIP **JUPITER FL**

1.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE ☒ DELETE

NAME **DT**
ECKLOFF, ALAN
STREET ADDRESS **717 US HWY 1 STE 602**
CITY-ST-ZIP **JUPITER FL**

1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **D**
HENRY, TIMOTHY
STREET ADDRESS **717 U S 1 STE 812**
CITY-ST-ZIP **JUPITER FL 33477**

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **D**
CONBOY, JACK
STREET ADDRESS **717 US HWY 1-809**
CITY-ST-ZIP **JUPITER FL**

2.2 NAME ☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

RICHARD ESSER
717 U.S. 1 UNIT 208
JUPITER, FL 33477

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/2/99

561-744 0643

CR2E037 (1/98)

0046501