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

2. Principal Place of Business

Suite, Apt. #, etc.

21

22

Mailing Address

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

2a. Mailing Address

Suite, Apt. #, etc.

26

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

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



3. Date Incorporated or Qualifed

08/08/1973

59-1565256

4. FEI Number

Zip   Country   Zip   Country   Zip   Country   S. Election Caropaign Financing   \$5.00 May 8e   Addison to Fass   Size   Size	City & Stat	28					5. Certifcate of	f Status Desired	ed Fee Required		
25   29   30   Trust Fund Contribution   Added to Fees		Country		Coun			6. Election Ca	mpaign Financing		\$5.00 May Be	
9. Name and Address of Current Registered Agent  ECKLOF, ALAN M 717 U S 1 STE 602 JUPITER FL 33477  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 negistered agent, or both, in the State of Florida, Such change was authorised by the corporation submits this statement for the purpose of changing its negistered agent, or both, in the State of Florida, Such change was authorised by the corporation submits this statement for the purpose of changing its negistered agent, and mailler with, and eachyth to obligation of Sections 617.0502, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its negistered agent. and mailler with, and eachyth to obligation of Sections 617.0502, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its negistered agent. and mailler with, and eachyth to obligation of Sections 617.0502, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its negistered agent. and the corporation submits this statement for the purpose of changing its negistered agent. and the corporation submits this statement for the purpose of changing its negistered agent. and the corporation submits this statement for the purpose of changing its negistered agent. and the corporation submits this statement for the purpose of changing its negistered agent. and the corporation submits this statement for the purpose of changing its negistered agent. and the corporation submits this statement for the purpose of changing its negistered agent. and the corporation submits this statement for the purpose of changing its negistered agent. and the corporation submits this statement for the purpose of changing its negistered agent. and the corporation submits this statement for the purpose of changing its negistered agent. and the corporation submits this statement for the purpose of c	24	25	29	30			Trust Fund Contribution Added to Fees				d to Fees
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TITLE VPS. SIMCIL, FRANK STREETADORESS TOTY ST-ZP JUPITER FL 33477  TITLE  OFFICERS AND DIRECTORS I 13 INCH STREETADORESS TOTY ST-ZP JUPITER FL 33477  TITLE  OKEEFE, FRANK STREETADORESS TOTY ST-ZP JUPITER FL 33477  TITLE  D OKEEFE, FRANK STREETADORESS TOTY US STEE 804  OKEEFE, FRANK STREETADORESS TOTY US STEE 804  OKEEFE, FRANK STREETADORESS TOTY US STEE 804  Addition  OKEEFE, FRANK STREETADORESS TOTY US STEE 804  ADDITIONS/CHANGES STREETADORESS TO OKEEFE, FRANK STREETADORESS TO OKEEFE, FRANK STREETADORESS TOTY US STEE 804  ADDITIONS/CHANGES STREETADORESS TOTY US STEE 804  ADDITIONS/CHANGES STREETADORESS TO OFFICERS AND DIRECTORS IN 12  Change Addition  Addition  OKEEFE, FRANK STREETADORESS TO OKEEFE TO					81	Name					l
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STE 602  JUPITER FL 33477  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 agent. I am familiar with, and accept the obligations of, Section 617 0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617 0503, Florida Statutes.  SIGNATURE  SIGNATURE  Signatura, posed or printed rained or ingulated agent and life if spotlable.  MOTE Registered Agent Agenture required when raincastering)  DATE  DATE  TITLE  VPS.  SIMCIL, FRANK  SIMCIL, FRANK  SIMCIL, FRANK  SIMCIL, FRANK  SIMCIL, FRANK  12 NAME  SIMCIL, FRANK  11 N L S, STE 305  JUPITER FL 33477  TITLE  TITL	•		•								
### City   FL   85 Zip Code    11. Pursuant to the provisions of Sections 617.0502 and 617.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, 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, and accept the obligations of, Section 617.0502 florida Statutes, or provided name of registered agent and site if application. (NOTE: Registered Agent agreetly required when reinstating)    DATE											
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 agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accapt the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accapt the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accapt the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accapt the appointment as registered agent, or both in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accapt the appointment as registered agent, or both in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accapt the appointment as registered agent, or both in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accapt the appointment as registered agent, agent, and the appointment as registered agent, agent, and the appointment as registered agent. I hereby accapt the appointment as registered agent, and the appointment as registered agent. I hereby accapt the appointment as authorized such as authorized agent. I hereby accapt the appointment as a reg		FI 33477			RA	City				85 Zi	n Code
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Signature, typed or printed name of registered Agent and site if applicable. (NOTE: Registered Agent sequence required when instalting)   DATE	office or n agent. I a	ngistered agent or both in the State	of Florida, Such change was	さいけわいパブログ	1 hv 1	tha comor	orporation submits the ration's board of direct	s statement for the tors. I hereby accep	purpose of t the appoi	changing ntment as	its registered registered
13.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOT	E: Registered	Agent	t signature rec				_	
SIMCIL, FRANK   12 NAME   13 STREET ADDRESS   717 U S 1, STE 305   14 CITY-ST-ZIP   JUPITER FL   3477   DELETE   21 TITLE   D   DELETE   31 TITLE   D   DELETE   31 TITLE   D   DELETE   31 STREET ADDRESS   717 U S 1 STE 107   JUPITER FL   DELETE   41 TITLE   DT   DELETE   41 TITLE   DT   DELETE   41 TITLE   DT   DELETE   JUPITER FL   JUPITER FL   DELETE   JUPITER FL   JUPITER FL   DELETE   JUPITER FL   JUPITER F	12.			13.			ADDITIONS	CHANGES TO OF	FICERS AN	D DIREC	TORS IN 12
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	CITY-ST-ZIP	JUPITER FL		# "				Secretar Secret		416 - 41 A 11-	a lafa-matia s

I. 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 ceth; 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 AND PRIVED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

199 521-744 06

Daytime Phone #

20En37 (11/08)

Applied For

Not Applicable