



# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 26, 2006 8:00 am**  
**Secretary of State**

01-26-2006 90038 048 \*\*\*\*61.25

<b>DOCUMENT # 743538</b> 1. Entity Name <b>VILLAGE ON THE GREEN CONDOMINIUM I ASSOCIATION, INC.</b>					
Principal Place of Business <b>PO BOX 1156 DUNEDIN, FL 34698 US</b>			Mailing Address <b>PO BOX 1156 C/O CITADEZ PASP. MGMT CRP DUNEDIN, FL 34697 US</b>		
2. Principal Place of Business <b>40347 US 19 N</b> Suite, Apt. #, etc. <b>St 229</b>		3. Mailing Address <b>40347 US 19 N</b> Suite, Apt. #, etc. <b>St 229</b>			
City & State <b>Tarpon Springs FL</b> Zip <b>34689</b>		City & State <b>Tarpon Springs FL</b> Zip <b>34689</b>		4. FEI Number <b>59-1898018</b>	
Country <b>USA</b>		Country <b>USA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>TANKER, ROBERT L 1022 MAIN ST. STE D DUNEDIN, FL 34698</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
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.  SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D</b> <b>STADMAN, CHARLES</b> <b>2526A LAURELWOOD DR</b> <b>CLEARWATER, FL 33763</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>PD</b> <b>BECKMAN, MARGE</b> <b>2540-C LAURELWOOD DR</b> <b>CLEARWATER, FL 33763</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>VPD</b> <b>KIBEL, GERALDINE</b> <b>2572 B LAURELWOOD DR</b> <b>CLEARWATER, FL 33763</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>TD</b> <b>BRADNER, BOB</b> <b>2298 A LAURELWOOD DR</b> <b>CLEARWATER, FL 33763</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>TD</b> <b>CLARRIDGE, JUDITH</b> <b>2544-A LAURELWOOD DR.</b> <b>CLEARWATER, FL 33763</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input 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:</b> <i>Marge Beckman</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<b>727-938-7730</b> <small>Date Daytime Phone #</small>		