# 2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 712536

Entity Name: VILLAGE GARDEN CONDOMINIUM ASSOCIATION, INC.

#### **Current Principal Place of Business:**

419 US HWY 1 C/O OFFICE NORTH PALM BEACH, FL 33408-5508

#### **Current Mailing Address:**

419 US HWY 1 C/O OFFICE NORTH PALM BEACH, FL 33408-5508

#### FEI Number: 59-1450730

#### Name and Address of Current Registered Agent:

## Certificate of Status Desired: No

DICKER, KRIVOK & STOLOFF 1818 S AUSTRALIAN AVE WEST PALM BEACH, FL 33409 US

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.

SIGNATURE: ED DICKER			09/08/2016	
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	PRESIDENT	Title	D	
Name	BRUNO, CAMILLE	Name	ROTZELL, KATHLEEN	
Address	419 US HWY ONE OFFICE	Address	419 US HWY ONE, OFFICE	
City-State-Zip:	NORTH PALM BEACH FL 33408	City-State-Zip:	NORTH PALM BEACH FL 33408	}
Title	DIRECTOR	Title	т	
Name	ETHERIDGE, CATHERINE	Name	PRICE, THOMAS	
Address	419 US HWY ONE, OFFICE	Address	419 US HWY 1, OFFICE	
City-State-Zip:	NORTH PALM BEACH FL 33408	City-State-Zip:	NORTH PALM BEACH FL 33408	3
Title	SECRETARY			
Name	BATISTA, JOSE			
Address	419 US HWY 1 OFFICE			
City-State-Zip:	NORTH PALM BEACH FL 33408			

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

#### SIGNATURE: JOSE BATISTA

SECRETARY

09/08/2016

Electronic Signature of Signing Officer/Director Detail

### FILED Sep 08, 2016 Secretary of State CC1934875104