

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 725236

**Entity Name:** VILLAGE ROYAL GREENHILL ASSOCIATION, INC.

**Current Principal Place of Business:**

SEA BREEZE CMS  
4227 NORTHLAKE BLVD.  
PALM BEACH GARDENS, FL 33410

**Current Mailing Address:**

SEA BREEZE CMS  
4227 NORTHLAKE BLVD.  
PALM BEACH GARDENS, FL 33410 US

**FEI Number:** 59-1537162

**Certificate of Status Desired:** No

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

IGLESIAS LAW GROUP, P.A.  
15800 PINES BLVD STE 303  
PEMBROKE PINES, FL 33027 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:** IGLESIAS LAW

04/23/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            STORCH, LEZLIE  
Address        SEA BREEZE CMS  
                  4227 NORTHLAKE BLVD.  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title            VP  
Name            SANTOS, PETER  
Address        SEA BREEZE CMS  
                  4227 NORTHLAKE BLVD.  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title            TREASURER  
Name            GAUDET, DONALD  
Address        SEA BREEZE CMS  
                  4227 NORTHLAKE BLVD.  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title            DIRECTOR  
Name            BIZZOZERO, LISA  
Address        SEA BREEZE CMS  
                  4227 NORTHLAKE BLVD.  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title            DIRECTOR  
Name            MARGOLIN, STEVE  
Address        SEA BREEZE CMS  
                  4227 NORTHLAKE BLVD.  
City-State-Zip: PALM BEACH GARDENS FL 33410

*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:** LEZLIE STORCH

PRESIDENT

04/23/2024

Electronic Signature of Signing Officer/Director Detail

Date