

**2015 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# 745742

**Entity Name:** VILLAGE CONDOMINIUM ASSOCIATION AT PALM BEACH, INC.

**FILED**  
**Oct 28, 2015**  
**Secretary of State**  
**CC7347822046**

**Current Principal Place of Business:**

1500 GOLDEN LAKES BLVD  
WEST PALM BEACH, FL 33411

**Current Mailing Address:**

1500 GOLDEN LAKES BLVD  
WEST PALM BEACH, FL 33411

**FEI Number: 59-1930223**

**Certificate of Status Desired: No**

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

KAYE BENDER REMBAUM, PL  
1200 PARK CENTRAL BLVD., SOUTH  
POMPANO BEACH, FL 33064 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title SECRETARY  
Name KRELL, NANCY  
Address 2328 S. CONGRESS AVE STE 2A  
City-State-Zip: WEST PALM BEACH FL 33406

Title TREASURER  
Name BIDART, LUCY  
Address 2328 S, CONGRESS AVE STE 2A  
City-State-Zip: WEST PALM BEACH FL 33406

Title DIRECTOR  
Name BLACK, HOWARD  
Address 2328 S, CONGRESS AVE STE 2A  
City-State-Zip: WEST PALM BEACH FL 33406

Title DIRECTOR  
Name DAVIDSON, WILLIAM  
Address 2328 S, CONGRESS AVE STE 2A  
City-State-Zip: WEST PALM BEACH FL 33406

Title DIRECTOR  
Name FIRESTONE, DALE  
Address 2328 S. CONGRESS AV.  
SUITE 2A  
City-State-Zip: WPB FL 33406

Title PRESIDENT  
Name MCCORRY, THOMAS  
Address 1500 GOLDEN LAKES BLVD  
City-State-Zip: WEST PALM BEACH FL 33411

Title VP  
Name SABERS, DEE  
Address 1500 GOLDEN LAKES BLVD  
City-State-Zip: WEST PALM BEACH FL 33411

Title DIRECTOR  
Name MICHAUD, JANICE  
Address 1500 GOLDEN LAKES BLVD  
City-State-Zip: WEST PALM BEACH FL 33411

*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: NANCY KRELL**

**SECRETARY**

**10/28/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date