

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 338217

FILED
Apr 23, 2009
Secretary of State

Entity Name: VILLAGE GREEN H CORPORATION

Current Principal Place of Business:

503 12TH AVE S
NAPLES, FL 34102

New Principal Place of Business:

Current Mailing Address:

745 12TH AVE S
AA
NAPLES, FL 34102

New Mailing Address:

FEI Number: 65-1065888 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE PROPERTY MANAGEMENT, LLC
745 12TH AVE S
AA
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: WALLACE, DAVE
Address: 482 BROAD AVE S
City-St-Zip: NAPLES, FL 34102

Title: D () Delete
Name: TOWNSEND, BARBARA
Address: 486 BROAD AVE S
City-St-Zip: NAPLES, FL 34102

Title: P () Delete
Name: FERRERA, JOYCE
Address: 428 BROAD AVE S
City-St-Zip: NAPLES, FL 34102

Title: VP () Delete
Name: O'SHAUGHNESSEY, WILLIAM
Address: 474 BROAD AVE S
City-St-Zip: NAPLES, FL 34102

Title: ST () Delete
Name: SABLES, JUDITH
Address: 27 LOCHMOORE FLVD
City-St-Zip: GROSSE POINT SHORES, MI 48236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: BEDTELYON, BETH
Address: 464 BROAD AVE S
City-St-Zip: NAPLES, FL 34102

Title: TD (X) Change () Addition
Name: TOWNSEND, BARBARA
Address: 486 BROAD AVE S
City-St-Zip: NAPLES, FL 34102

Title: PD (X) Change () Addition
Name: BEEKLEY, CLAY
Address: 574 PONTIUS RD
City-St-Zip: CINCINNATI, OH 45233

Title: SD (X) Change () Addition
Name: ARNN, DEBORAH
Address: 3 LITTLE SERREL LANE
City-St-Zip: LEXINGTON, VA

Title: VPD (X) Change () Addition
Name: ADOLPH, RICK
Address: 408 BROAD AVE S
City-St-Zip: NAPLES, FL 34102

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CLAY BEEKLEY

P

04/23/2009

Electronic Signature of Signing Officer or Director

Date