## 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Sep 04, 2007 **DOCUMENT#714157** Secretary of State

Entity Name: VIRGINIAN APARTMENTS OF POMPANO BEACH, INC.

**Current Principal Place of Business: New Principal Place of Business:** 370 SOUTH CYPRESS ROAD POMPANO BEACH, FL 33060 US **Current Mailing Address: New Mailing Address:** 370 SOUTH CYPRESS ROAD POMPANO BEACH, FL 33060 FEI Number: 59-1229740 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ST. PIERRE, DONALD 310 S CYPRESS RD APT #704 POMPANO BEACH, FL 33060 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition ST PIERRE, DONALD Name: Name: 310 S CYPRESS RD, APT 704 Address: Address: City-St-Zip: POMPANO BEACH, FL 33060 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition SUMMERS, JAMES Name: FOLGO, LAWRENCE Name: Address: 400 S CYPRESS RD. APT 327 Address: 310 S CYPRESS RD. APT 725 City-St-Zip: POMPANO BEACH, FL 33060 City-St-Zip: POMPANO BEACH, FL 33060 Title: () Delete Title: () Change () Addition WHITE, HENRY Name: Name: 350 S CYPRESS RD, APT 501 Address: Address: City-St-Zip: POMPANO BEACH, FL 33060 City-St-Zip: Title: ΑT ( ) Delete Title: () Change () Addition

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 617, Florida Statutes; and that my name appears

Name:

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

SIGNATURE: DONALD ST PIERRE **PRES** 09/04/2007

above, or on an attachment with an address, with all other like empowered.

GERSTENBERG, GERRY

TIERS, MARY ANN

FOLGO, LARRY

418 S CYPRESS RD, APT 103

POMPANO BEACH, FL 33060

412 S CYPRESS RD APT 230

POMPANO BEACH, FL 33060

310 S CYPRESS RD, APT 725

POMPANO BEACH, FL 33060

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STIPP, CHERYL J

330 S CYPRESS RD, APT 602

POMPANO BEACH, FL 33060