

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 14, 2008 8:00 am
Secretary of State

02-14-2008 90019 012 ****61.25

DOCUMENT # 722542

1. Entity Name

VILLAGE ROYALE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

2171 N.E. FIRST COURT
BLDG 25
BOYNTON BEACH FL 33435

Mailing Address

2171 N.E. FIRST COURT
BOYNTON BEACH FL 33435

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number
59-1410631

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DICKEN, EDWARD
500 AUSTRALIAN AVE
SUITE 600
WEST PALM BEACH FL 33401

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	CARIDEO, JOHN	
STREET ADDRESS	2102 NE 1ST WAY	
CITY- ST- ZIP	BOYNTON BEACH FL 33435	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	CARDEN, NANCY	
STREET ADDRESS	2164 NE 1ST WAY	
CITY- ST- ZIP	BOYNTON BEACH FL 33435	
TITLE	SD	<input type="checkbox"/> Delete
NAME	WESTON, SOPHIA	
STREET ADDRESS	2182 NORTHEAST FIRST WAY	
CITY- ST- ZIP	BOYNTON BEACH FL 33435	
TITLE	TD	<input type="checkbox"/> Delete
NAME	GUILBAULT, DENNIS	
STREET ADDRESS	2102 NE 1ST WAY	
CITY- ST- ZIP	BOYNTON BEACH FL 33435	
TITLE	D	<input type="checkbox"/> Delete
NAME	BRAUN, HANS	
STREET ADDRESS	2192 NORTHEAST FIRST WAY	
CITY- ST- ZIP	BOYNTON BEACH FL 33435	
TITLE	VD	<input type="checkbox"/> Delete
NAME	CIARAMELLA, JOHN	
STREET ADDRESS	2191 NORTHEAST FIRST COURT	
CITY- ST- ZIP	BOYNTON BEACH FL 33435	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	YOUNIENS, SANDRA	
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

John Ciaramella

John Ciaramella 2-5-08 561 632-0748