2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2009
Secretary of State

DOCUMENT# 723521

Entity Name: VILLAGE ROYALE GREENRIDGE ASSOCIATION, INC.

Current Principal Place of Business:

2300 NE FIRST LANE
ROOM 300
BOYNTON BEACH, FL 33435 US

New Principal Place of Business:

Current Mailing Address:

2300 NE FIRST LANE
ROOM 300
BOYNTON BEACH, FL 33435 US

New Mailing Address:

FEI Number: 59-1521445 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRAMM, ALBERT
2300 N.E 1ST LANE
BOYNTON BEACH, FL 33435 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

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	GRAMM, ALBERT	
Address:	2300 NE 1ST LANE	
City-St-Zip:	BOYNTON BEACH, FL 33435	
Title:	VP	( ) Delete
Name:	GOLDSTEIN, JOAN	
Address:	2300 NE 1ST LANE	
City-St-Zip:	BOYNTON, FL 33435	
Title:	T	( ) Delete
Name:	HARDY, ROBERT	
Address:	2300 N.E. 1ST LANE	
City-St-Zip:	BOYNTON BEACH, FL 33435	
Title:	S	( ) Delete
Name:	GIBSON, ROBERTA	
Address:	2300 N.E. 1ST LANE	
City-St-Zip:	BOYNTON BCH., FL 33435	
Title:	D	( ) Delete
Name:	GRAMM, ALBERT	
Address:	2300 NE 1ST LANE	
City-St-Zip:	BOYNTON BEACH, FL 33435	
Title:	D	( ) Delete
Name:	GOLDSTEIN, JOAN	
Address:	2300 NE 1ST AVE	
City-St-Zip:	BOYNTON BEACH, FL 33435	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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

SIGNATURE: ALBERT GRAMM P 02/23/2009

Electronic Signature of Signing Officer or Director — Date