

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2006 8:00 am
Secretary of State

02-08-2006 90015 001 ****61.25

DOCUMENT # 725226 1. Entity Name VILLAGE ROYALE GREENTREE ASSOCIATION, INC.					
Principal Place of Business 2515 NE 2ND COURT BOYNTON BEACH, FL 33435			Mailing Address 2515 NE 2ND COURT BOYNTON BEACH, FL 33435		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-1537161	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent LEVINE, MORTON 2515 NE 2ND COURT APT 402 BOYNTON BEACH, FL 33435				7. Name and Address of New Registered Agent Name SANDUSKY Leslie Street Address (P.O. Box Number is Not Acceptable) 2515 NE 2ND COURT APT 108 City BOYNTON BEACH FL Zip Code 33435	
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 <u><i>Leslie M. Sandusky</i></u> DATE <u>2-5-06</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2006		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P	☒ Delete	TITLE	P	☒ Change ☐ Addition
NAME	LEVINE, MORTON		NAME	SANDUSKY, LESLIE	
STREET ADDRESS	2515 NW 2ND COURT, APT 402		STREET ADDRESS	2515 NE 2ND COURT APT 108	
CITY-ST-ZIP	BOYNTON BEACH, FL 33435		CITY-ST-ZIP	BOYNTON BEACH FL 33435	
TITLE	T	☒ Delete	TITLE	T	☒ Change ☐ Addition
NAME	BLOOM, AUDREY		NAME	Giorgio DIMARTINO	
STREET ADDRESS	2515 NW 2ND COURT, APT 408		STREET ADDRESS	2515 NE 2ND COURT APT 301	
CITY-ST-ZIP	BOYNTON BEACH, FL 33435		CITY-ST-ZIP	BOYNTON BEACH FL 33435	
TITLE	VP	☒ Delete	TITLE	VP	☒ Change ☐ Addition
NAME	BLOOM, MANRY		NAME	KOLBE, HENRIETTA	
STREET ADDRESS	2515 NW 2ND COURT, APT 408		STREET ADDRESS	2515 NE 2ND COURT APT 416	
CITY-ST-ZIP	BOYNTON BEACH, FL 33435		CITY-ST-ZIP	BOYNTON BEACH FL 33435	
TITLE	S	☒ Delete	TITLE	S	☒ Change ☐ Addition
NAME	LACKS, SARA		NAME	KAPLAN, KATHERINE	
STREET ADDRESS	2515 NW 2ND COURT, APT 407		STREET ADDRESS	2515 NE 2ND COURT APT 109	
CITY-ST-ZIP	BOYNTON BEACH, FL 33435		CITY-ST-ZIP	BOYNTON BEACH FL 33435	
TITLE	D	☒ Delete	TITLE	D	☒ Change ☐ Addition
NAME	ROSENSTEIN, SARAH		NAME	IMHOFF, PAULINE	
STREET ADDRESS	2515 NW 2ND COURT, APT 406		STREET ADDRESS	2515 NE 2ND COURT APT 217	
CITY-ST-ZIP	BOYNTON BEACH, FL 33435		CITY-ST-ZIP	BOYNTON BEACH FL 33435	
TITLE	D	☐ Delete	TITLE	D	☐ Change ☒ Addition
NAME	MATLIN, HARVEY		NAME	SCHWARTZ, MARVIN	
STREET ADDRESS	2515 NW 2ND COURT, APT 203		STREET ADDRESS	2515 NE 2ND COURT APT 409	
CITY-ST-ZIP	BOYNTON BEACH, FL 33435		CITY-ST-ZIP	BOYNTON BEACH FL 33435	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u><i>Leslie M. Sandusky</i></u>			Date: <u>2-5-06</u>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Daytime Phone #		