

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 06, 2003 8:00 am
Secretary of State

02-06-2003 90063 013 ****61.25

DOCUMENT # 725235

1. Entity Name

VILLAGE ROYALE GREENDALE ASSOCIATION, INC.



Principal Place of Business

**2601 N E 3RD COURT
BOYNTON BEACH FL 33435**

Mailing Address

**2601 N E 3RD COURT
BOYNTON BEACH FL 33435**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1537163**

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

**FAYNE, BARBARA
2601 NE 3RD CT APT 404
BOYNTON BCH FL 33435**

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 applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

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 NAME STREET ADDRESS CITY-ST-ZIP	PD SORGMAN, STANLEY 2601 N.E. 3 CT APT. 204 BOYNTON BEACH FL 33435	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BERKOWITZ, NAT 2601 NE 3 CT. BOYNTON BEACH FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD FAYNE, BARBARA 2601 NE 3 CT APT #404 BOYNTON BEACH FL 33435	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BARNICK, GERALDINE 2601 NE 3RD COURT BOYNTON BCH FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SORGMAN, ELINOR 2601 NE 3 RD CT BOYNTON BEACH FL 33435	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RYALL, OWEN 2601 NE 3 CT BOYNTON BEACH FL 33435	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP NICHOLAS SQUICCIARINI 2601 N.E. 3 CT. #402 BOYNTON BEACH FL. 33435	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	HELEN MUNCE 2601 N.E. 3 CT. APT. 105 BOYNTON BEACH FL. 33435	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERKOWITZ, NAT 2601 NE 3 CT BOYNTON BEACH FL 33435	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: **SIGNATURE OF BARBARA FAYNE**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-10-03 561-731-0137