

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728847

FILED  
May 07, 2009  
Secretary of State

**Entity Name:** THE VIRGINIAN ASSOCIATION, INC.

**Current Principal Place of Business:**

8360 W. OAKLAND PARK BLVD  
301  
SUNRISE, FL 33351

**New Principal Place of Business:**

1133 UNIVERSITY DRIVE  
STE 211  
PLANTATION, FL 33324

**Current Mailing Address:**

P.O. BOX 452199  
SUNRISE, FL 333452199 US

**New Mailing Address:**

P.O. BOX 19439  
PLANTATION, FL 33318

**FEI Number:** 59-1992163      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

LEVINE, JAY S PA  
2500 N MILITARY TRAIL #283  
BOCA RATON, FL 33431 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: DVP ( ) Delete  
Name: ILCA, TEODOR  
Address: P.O. BOX 8506  
City-St-Zip: CORAL SPRINGS, FL 33075

Title: DP ( ) Delete  
Name: PAUL, NADIA  
Address: 4603 HIGH GATE DR #A  
City-St-Zip: DELRAY BEACH, FL 33445

Title: DST ( ) Delete  
Name: JACQUES, JEANNOT  
Address: 6836 BELMONT SHORE DR  
City-St-Zip: DELRAY BEACH, FL 33446

**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:

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: NADIA PAUL

BOD

05/07/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date