

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733602

FILED
Mar 28, 2007
Secretary of State

Entity Name: THE VILLAGE FOUNDATION, INC.

Current Principal Place of Business:

3180 BISCAYNE BLVD.
MIAMI, FL 33137

New Principal Place of Business:

3050 BISCAYNE BLVD.
MIAMI, FL 33137

Current Mailing Address:

3180 BISCAYNE BLVD.
MIAMI, FL 33137

New Mailing Address:

3050 BISCAYNE BLVD.
MIAMI, FL 33137

FEI Number: 59-1627141 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD., SUITE 101
TALLAHASSEE, FL 32301 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: PD () Delete
Name: STEINBERG, RICHARD E
Address: 900 GRIER DRIVE
City-St-Zip: LAS VEGAS, NV 89119

Title: DST () Delete
Name: HOLDER, JAY
Address: 975 41ST ST
City-St-Zip: MIAMI BEACH, FL 33155

Title: DC (X) Delete
Name: SILVERMAN, ADAM
Address: 839 HERITAGE DRIVE
City-St-Zip: WESTON, FL 33326

Title: CD () Delete
Name: CASSINGER, MARY
Address: 2950 S INDUSTRIAL ROAD
City-St-Zip: LAS VEGAS, NV 89109

Title: D () Delete
Name: WALSH, TOM
Address: 180 28TH AVENUE NORTH
City-St-Zip: ST PETERSBURG, FL 33704

Title: D () Delete
Name: WADHAMS, JIM
Address: 3773 HOWARD HUGHES PKWY, 3RD FL
City-St-Zip: LAS VEGAS, NV 89109

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
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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 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: AURELIO F. MORRELL

CFO

03/28/2007

Electronic Signature of Signing Officer or Director

_____ Date