

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737346

FILED
Mar 23, 2009
Secretary of State

Entity Name: VILLAGE SQUARE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

VILLAGE SQUARE CONDO
PLANTATION, FL 33313 US

New Principal Place of Business:

Current Mailing Address:

7551 N.W. 16TH ST.
PLANTATION, FL 33313 US

New Mailing Address:

FEI Number: 59-1735297

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROUGH, CHADROW & LEVINE, P.A.
GLOBAL COMMERCE CENTER
1900 NORTH COMMERCE PARKWAY
WESTON, FL 33326 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: D () Delete
Name: HUMPHREY, DIANA
Address: 7541 NW 16TH ST #1101
City-St-Zip: PLANTATION, FL 33313

Title: D () Delete
Name: ALI, FERA AZ
Address: 7541 NW 16TH ST #2108
City-St-Zip: PLANTATION, FL 33313

Title: D () Delete
Name: MUNROE, WARREN
Address: 7541 NW 16TH ST #2310
City-St-Zip: PLANTATION, FL 33313

Title: DT () Delete
Name: PARKER, PEGGY
Address: 7501 NW 16ST #3105
City-St-Zip: PLANTATION, FL

Title: DP () Delete
Name: FRANKLIN, DAVID
Address: 7541 NW 16TH ST #4106
City-St-Zip: PLANTATION, FL 33313

Title: DS () Delete
Name: BOREAU, YVES
Address: 7541 NW 16TH ST #1208
City-St-Zip: PLANTATION, FL 33313

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: DS (X) Change () Addition
Name: MILLS, SHARMILLA
Address: 7501 NW 16TH ST #3304
City-St-Zip: PLANTATION, FL 33313

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: DAVID FRANKLIN

DP

03/23/2009

Electronic Signature of Signing Officer or Director

Date