

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90078 005 ****61.25

40075622



03302007 Chg-NP CR2E037 (12/06)

4. FEI Number 59-1961494 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DOCUMENT # 737777

1. Entity Name
VILLAGE GREEN CONDOMINIUM ASSOCIATION OF
SARASOTA, INC.



Principal Place of Business
3463 BEE RIDGE RD
SARASOTA, FL 34239 US

Mailing Address
63 SARASOTA CENTER BLVD
SUITE 104
SARASOTA, FL 34240 US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address
3707 Radnor Place

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Sarasota, FL

Zip

Country

Zip

34232

Country

Sarasota

6. Name and Address of Current Registered Agent

ADI PROPERTY MANAGEMENT
63 SARASOTA CENTER BLVD
SUITE 104
SARASOTA, FL 34240

7. Name and Address of New Registered Agent

Name Prokop P.A.

Street Address (P.O. Box Number is Not Acceptable)
3707 Radnor Place

City Sarasota

FL

Zip Code 34232

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

Kenneth D. Prokop

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2007

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	D PLATSON, DONALD 3435 BEE RIDGE RD UNIT 220 SARASOTA, FL 34239	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD MARCUS, SUSAN 3437 BEE RIDGE RD #214 SARASOTA, FL 34239	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD PEZZELLA, MARIO 3880 MALEC CIRCLE SARASOTA, FL 34233	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MCGUIRE, JOHN 3463 BEE RIDGE ROAD UNIT 318 SARASOTA, FL 34239	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS ADI PROPERTY MANAGEMENT 8051 N TAMiami TRAIL SARASOTA, FL 34243	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP VOLLMER, HELENE 4005 CASEY KEY ROAD NOKOMIS, FL 34275	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SALLY Fieger 3435 Bee Ridge Rd #217 SARASOTA, FL 34232	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

Mario Pezzella

Date

Daytime Phone #