

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744643

FILED
Mar 24, 2009
Secretary of State

Entity Name: VILLAGE GREEN OF BRADENTON CONDOMINIUM, SECTION 9, ASSOCIATION, INC.

Current Principal Place of Business:

804 68TH ST W
BRADENTON, FL 34209 US

New Principal Place of Business:

Current Mailing Address:

804 68TH ST W
BRADENTON, FL 34209 US

New Mailing Address:

P.O. BOX 1607
HOLMES BEACH, FL 34218 US

FEI Number: 59-2029907

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLMES BEACH PROPERTY MGMT LLC
6400 MAINATEE AVE W. STE. G
BRADENTON, FL 34209 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: TD () Delete
Name: ONDRE, SUE
Address: 804 68TH ST W
City-St-Zip: BRADENTON, FL 34209

Title: P () Delete
Name: GRANT, DONNA
Address: 7001 8TH AVE W
City-St-Zip: BRADENTON, FL 34209

Title: D () Delete
Name: BARINKA, MELBA
Address: 6814 9TH AVE W
City-St-Zip: BRADENTON, FL 34209

Title: VP () Delete
Name: YOUNG, CRAIG
Address: 6902 9TH AVE W
City-St-Zip: BRADENTON, FL 34209

Title: S () Delete
Name: BURGESS, NORMAN
Address: 6916 9TH AVE W
City-St-Zip: BRADENTON, FL 34209

Title: () Delete
Name:
Address:
City-St-Zip:

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: M () Change (X) Addition
Name: CONDRON, TOM
Address: 6400 MANATEE AVENUE WEST SUITE G
City-St-Zip: BRADENTON, FL 34209

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: TOM CONDRON

M

03/24/2009

Electronic Signature of Signing Officer or Director

_____ Date