

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746450

FILED  
Apr 28, 2007  
Secretary of State

**Entity Name:** VILLAGE GREEN CONDOMINIUM ASSOCIATION OF MELBOURNE, INC.

**Current Principal Place of Business:**

2901 ALBEMARLE ST  
MELBOURNE, FL 32901 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2438  
MELBOURNE, FL 32902

**New Mailing Address:**

**FEI Number:** 59-2152190

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEVINE, RICHARD  
1920 POINSETTA BLVD  
MELBOURNE, FL 32901 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: SD ( ) Delete  
Name: LEVINE, IRYNA  
Address: 1920 POINSETTA BLVD  
City-St-Zip: MELBOURNE, FL 32901

Title: PD ( ) Delete  
Name: RICHARD LEVINE,  
Address: 1920 POINETTA BLVD  
City-St-Zip: MELBOURNE, FL 32901

Title: TD ( ) Delete  
Name: LEVINE, PHILIP  
Address: 400 ATLANTIC ST  
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: D ( ) Delete  
Name: HEHOLT, DWIGHT  
Address: 732 NEVADA DR NE  
City-St-Zip: PALM BAY, FL 32907

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: TD (X) Change ( ) Addition  
Name: LEVINE, IRYNA  
Address: 1920 POINSETTA BLVD  
City-St-Zip: MELBOURNE, FL 32901

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: LEVINE, PHILIP  
Address: 400 ATLANTIC ST  
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: D (X) Change ( ) Addition  
Name: KENNEDY, MICHAEL  
Address: PO BOX 100913  
City-St-Zip: PALM BAY, FL 32910

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: RICHARD LEVINE

PD

04/28/2007

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

\_\_\_\_\_  
Date