## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 746715**

FILED Mar 05, 2009 Secretary of State

Entity Name: THE VILLAS OF GREEN GLEN II ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 5995 BANNOCK TERR. BOYNTON BCH, FL 33437 **Current Mailing Address: New Mailing Address:** 5995 BANNOCK TERR. BOYNTON BCH, FL 33437 FEI Number: 59-1983466 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CONNELL, EDWARD O 5995 BANNOCK TERRACE US BOYNTON BEACH, FL 33437 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition ABRAMS, GALE ABRAMS, GALE Name: Name: 5637 LAKEVIEW MEWS CIR Address: 5637 LAKEVIEW MEWS CIR Address: City-St-Zip: BOYNTON BEACH, FL 33437 City-St-Zip: BOYNTON BEACH, FL 33437 Title: Title: ( ) Delete () Change () Addition Name: HIRSCH, ERNI Name: Address: 5740 PIPING ROCK DRIVE Address: City-St-Zip: BOYNTON BEACH, FL 33437 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition PREZIOSI, FRANK PREZIOSI, FRANK Name: Name: 5760 PIPING ROCK DRIVE Address: Address: 5760 PIPING ROCK DRIVE City-St-Zip: BOYNTON BEACH, FL 33437 City-St-Zip: BOYNTON BEACH, FL 33437 ( ) Delete Title: Title: () Change () Addition BAWCOMBE, ARLENE Name: Name: 5791 LAKEVIEW MEWS PLACE Address: Address: City-St-Zip: BOYNTON BEACH, FL 33437 City-St-Zip: Title: () Delete Title: () Change () Addition WEINER, LINDA Name: Name: 5681 LAKEVIEW MEWS DR. Address: Address: City-St-Zip: BOYNTON BEACH, FL 33437 City-St-Zip: Title: () Delete Title: () Change () Addition SPINA, MICHAEL Name: Name: Address: 5550 PIPING ROCK DR Address: BOYNTON BEACH, FL 33437 City-St-Zip: City-St-Zip:

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: FRANK PREZIOSI MR. 03/05/2009