## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#751607** 

FILED Apr 20, 2009 Secretary of State

Entity Name: NUMBER 4 CONDOMINIUM ASSOCIATION-VILLAGE GREEN, INC.

**Current Principal Place of Business: New Principal Place of Business:** 2100 SPRINGDALE BLVD PALM SPRINGS, FL 33461 **Current Mailing Address: New Mailing Address:** 3082 JOG ROAD LAKE WORTH, FL 33467 FEI Number: 59-2411161 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: STOLOFF, SCOTT A 1818 AUSTRALIAN AVE SOUTH STE 400 WEST PALM BEACH, FL 33409 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 ANDERSON, ROY ANDERSON, ROY Name: Name: 2100 SPRINGDALE BLVD Y 314 Address: 2100 SPRINGDALE BLVD., Y-314 Address: City-St-Zip: LAKE WORTH, FL 33461 City-St-Zip: LAKE WORTH, FL 33461 Title: () Delete Title: () Change () Addition Name: MARGOLIS, JOE Name: Address: 2000 SPRINGDALE BLVD. #F-103 Address: City-St-Zip: PALM SPRINGS, FL 33461 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition FARIELLO, AMY CONNORS, NIKKI Name: Name: 2100 SPRING BLVD., Y212 Address: Address: 2200 SPRING BLVD., L-102 City-St-Zip: PALM SPRINGS, FL 33461 City-St-Zip: PALM SPRINGS, FL 33461 Title: VΡ ( ) Delete Title: () Change () Addition Name: LOPEZ, TONY Name: 2200 SPRINGDALE BLVD, L-304 Address: Address: City-St-Zip: LAKE WORTH, FL 33461 City-St-Zip: Title: () Delete Title: () Change () Addition PICONE, ALICE Name: Name: 2000 SPRINGDALE BLVD Address: Address: PALM SPRINGS, FL 33461 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: ROY ANDERSON P 04/20/2009