

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751728

FILED
Apr 30, 2008
Secretary of State

Entity Name: VILLAS OF VILLAGE GREEN PROPERTY OWNERS' ASSOCIATION INC.

Current Principal Place of Business:

ASSOCIATION, INC.
1487 SE COLCHESTER CIRCLE
PORT ST LUCIE, FL 34952

New Principal Place of Business:

Current Mailing Address:

1487 SE COLCHESTER CIRCLE
PORT ST. LUCIE, FL 34952

New Mailing Address:

FEI Number: 59-2182228 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSS, DEBORAH L ESQ
ROSS, EARLE & BONAN, P.A.
759 S. FEDERAL HWY #212
STUART, FL 34995 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: P () Delete
Name: NELSSON, DON
Address: 1498 SE COLCHESTER CIRCLE
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: TD () Delete
Name: POWELL, ARNOLD
Address: 1543 SE DEWBERRY COURT
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: DVP () Delete
Name: WONG, MYRNA
Address: 1480 COLCHESTER CIRCLE
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: SD () Delete
Name: MCERLEAN, JERRY
Address: 1447 SE COLCHESTER CIRCLE
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: D () Delete
Name: TOTARO, MICHAEL
Address: 1574 COLCHESTER
City-St-Zip: PORT SAINT LUCIE, FL 34952

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NEILSON, DON
Address: 1498 SE ASHFORD PLACE
City-St-Zip: PORT ST. LUCIE, FL 34952

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

Title: DVP (X) Change () Addition
Name: WONG, MYRNA
Address: 1480 SE COLCHESTER CIRCLE
City-St-Zip: PORT ST. LUCIE, FL 34952

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

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

Title: D () Change (X) Addition
Name: DINGEE, LOUISE
Address: 1451 SE COLCHESTER CIRCLE
City-St-Zip: PORT SAINT LUCIE, FL 34952

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: ARNOLD POWELL

TD

04/30/2008

Electronic Signature of Signing Officer or Director

_____ Date