

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 23, 2008 8:00 am**  
**Secretary of State**

04-23-2008 90046 035 \*\*\*\*61.25

**DOCUMENT # 753479**

1. Entity Name  
VILLAGE TOWNHOUSE - POMPANO BEACH, INC.



Principal Place of Business  
%KATZMAN & KORR, P.A.  
1501 NW 49TH ST. SUITE 202  
FT. LAUDERDALE, FL 33309 US

Mailing Address  
%KATZMAN & KORR, P.A.  
1501 NW 49TH ST. SUITE 202  
FT. LAUDERDALE, FL 33309 US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02122008 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number  
59-2031456

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KATZMAN & KORR  
1501 NW 49TH STREET  
SUITE 202  
FORT LAUDERDALE, FL 33309

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25  
Due by May 1, 2008

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make check payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P  
NAME MCCAFFORTY, JAMES  
STREET ADDRESS 1125 S FLAGLER AVE #512  
CITY - ST - ZIP POMPANO BEACH, FL 33060 ☒ Delete

TITLE P  
NAME ZUCCO, GEORGE  
STREET ADDRESS 1325 S FLAGLER AVE #108  
CITY - ST - ZIP POMPANO BEACH, FL 33060 ☐ Change ☒ Addition

TITLE TD  
NAME VINCI, CHRISTINA  
STREET ADDRESS 1265 S FLAGLER AVE #211  
CITY - ST - ZIP POMPANO BEACH, FL 33060 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Change ☐ Addition

TITLE VD  
NAME HOUSE, THOMAS  
STREET ADDRESS 1265 S FLAGLER AVE #215  
CITY - ST - ZIP POMPANO BEACH, FL 33060 ☒ Delete

TITLE YD  
NAME STENMARK, MARIA  
STREET ADDRESS 1285 S FLAGLER AVE #204  
CITY - ST - ZIP POMPANO BEACH, FL 33060 ☐ Change ☒ Addition

TITLE SD  
NAME WYATT, ELIZABETH  
STREET ADDRESS 1145 S FLAGLER AVE #504  
CITY - ST - ZIP POMPANO BEACH, FL 33060 ☒ Delete

TITLE SD  
NAME BRANDYAN, ROBIN  
STREET ADDRESS 1125 S FLAGLER AVE #515  
CITY - ST - ZIP POMPANO BEACH, FL 33060 ☐ Change ☒ Addition

TITLE SD  
NAME CONSTANTINO, THEA  
STREET ADDRESS 1265 S FLAGLER AVE #216  
CITY - ST - ZIP POMPANO BEACH, FL 33060 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11, if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*George Zucco* GEORGE ZUCCO

4/17/08

954.785.9057

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #