

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754873

FILED
Apr 22, 2009
Secretary of State

Entity Name: VILLAGE GREEN OF BRADENTON CONDOMINIUM, SECTION 11, ASSOCIATION, INC.

Current Principal Place of Business:

6703 7TH AVE W
BRADENTON, FL 34209 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 14682
BRADENTON, FL 342804682 US

New Mailing Address:

FEI Number: 59-2121480

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LINEMAN, LYNN E
6704 9TH AVE W
BRADENTON, FL 34209 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: PD () Delete
Name: LINEMAN, LYNN
Address: 6704 9TH AVE. W.
City-St-Zip: BRADENTON, FL 34209

Title: VPD () Delete
Name: GASPARI, ALFRED
Address: 708 67TH ST., W
City-St-Zip: BRADENTON, FL 34209

Title: SD () Delete
Name: PARADISE, ROBERT
Address: 709 68TH ST W
City-St-Zip: BRADENTON, FL 34209

Title: TD () Delete
Name: O'BANNON, SUSAN
Address: 6703 7TH AVE W
City-St-Zip: BRADENTON, FL 34209

Title: D () Delete
Name: DEWART, ROBERT
Address: 801 68TH ST W
City-St-Zip: BRADENTON, FL 34209

Title: D () Delete
Name: RIEKER, ALBERT
Address: 701 68TH ST W
City-St-Zip: BRADENTON, FL 34209

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: D (X) Change () Addition
Name: CIOFFI, JOSEPH
Address: 802 67TH ST W
City-St-Zip: BRADENTON, FL 34209

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: LYNN E. LINEMAN

PD

04/22/2009

Electronic Signature of Signing Officer or Director

Date