


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 12, 2008 08:00 A**  
**Secretary of State**

<b>DOCUMENT # 758439</b> 1. Entity Name VILLAGE ESTATES PROPERTY OWNERS ASSOCIATION, INC.	
--	---

Principal Place of Business 3714 VILLAGE ESTATES PL TAMPA, FL 33618	Mailing Address 3714 VILLAGE ESTATES PL TAMPA, FL 33618
---	---

DO NOT WRITE IN THIS SPACE



03092008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2929022	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BERRY, STEVEN M  
3714 VILLAGE ESTATES PL  
TAMPA, FL 33618

DO NOT WRITE  
IN THIS SPACE

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when restate) DATE \_\_\_\_\_

<b>Filing Fee is \$61.25 Due by May 1, 2008</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	000000255567 03/27/08-80055-017 61.25
---	--	--

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MCMULLEN, MICHAEL 3726 VILLAGE ESTATES PL TAMPA, FL 33618
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BERRY, STEVEN M 3714 VILLAGE ESTATES PL TAMPA, FL 33618
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD TATE, SUZY 3703 VILLAGE ESTATES PL TAMPA, FL 33618
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WARD, JOHN 3716 VILLAGE ESTATES PL TAMPA, FL 33618
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE  
IN THIS SPACE

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:** Steven M. Berry / STEVEN M. BERRY 3/8/08 (813)245-1744  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #