


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007 8:00 am
Secretary of State

04-26-2007 90193 007 ****61.25

DOCUMENT # 769537 1. Entity Name VILLAGE WEST COMMUNITY ASSOCIATION, INC.					
Principal Place of Business 4501 36TH AVE. WEST BRADENTON, FL 34209			Mailing Address 4501 36TH AVE. WEST BRADENTON, FL 34209		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent BOUCHARD, DONALD 4507 33RD AVENUE WEST BRADENTON, FL 34209				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Make check payable to Florida Department of State </div> </div>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GUIDRY, ANDREA <input checked="" type="checkbox"/> Delete 4708 36TH AVENUE W BRADENTON, FL 34209		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY KINCAID, GLORIA <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4703 36TH AVE WEST BRADENTON, FL 34209	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CARLOCK, JOHN <input type="checkbox"/> Delete 4602 34TH AVENUE DRIVE WEST BRADENTON, FL 34209		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BOUCHARD, DONALD <input type="checkbox"/> Delete 4507 33RD AVENUE WEST BRADENTON, FL 34209		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ALD COLLANDRA, MARY <input type="checkbox"/> Delete 4503 36TH AVENUE W BRADENTON, FL 34209		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ALD FETCHKO, KENNETH <input type="checkbox"/> Delete 4704 36TH AVENUE W BRADENTON, FL 34209		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: <u>Donald E. Bouchard</u> DONALD E. BOUCHARD <u>4/19/07</u> <u>941-742-7824</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					