

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006261

FILED
Apr 30, 2008
Secretary of State

Entity Name: VICTORIA GROVE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O BANYAN PROPERTY MANAGEMENT, INC
2328 S CONGRESS AVE SUITE 1C
WEST PALM BEACH, FL 33406

New Principal Place of Business:

Current Mailing Address:

C/O BANYAN PROPERTY MANAGEMENT, INC
2328 S CONGRESS AVE SUITE 1C
WEST PALM BEACH, FL 33406

New Mailing Address:

FEI Number: 38-3659390

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPLAN, LOU
C/O SACHS SAX KLEIN
501 YAMATO RD., STE. 4150
BOCA RATON, FL 33431 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: CONNOR, ROBERT
Address: 120 LANCASTER WAY
City-St-Zip: ROYAL PALM BEACH, FL 33414

Title: VP () Delete
Name: MAES, DONNA
Address: 112 NEWBERRY LANE
City-St-Zip: ROYAL PALM BEACH, FL 33414

Title: S () Delete
Name: WISE, BILL
Address: 114 NEWBERRY LANE
City-St-Zip: ROYAL PALM BEACH, FL 33414

Title: T () Delete
Name: MILDOLO, BOB
Address: 133 LANCASTER WAY
City-St-Zip: ROYAL PALM BEACH, FL 33414

Title: D () Delete
Name: HIGHLEY, SABRINA
Address: 101 NEWBERRY WAY
City-St-Zip: ROYAL PALM BEACH, FL 33414

Title: D () Delete
Name: BARNETT, GLAISTER
Address: 257 KENSINGTON WAY
City-St-Zip: ROYAL PALM BEACH, FL 33414

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: D (X) Change () Addition
Name: BUXBAUM, STEVE
Address: 280 KENSINGTON WAY
City-St-Zip: ROYAL PALM BEACH, FL 33414

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

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: ROBERT CONNER

PD

04/30/2008

Electronic Signature of Signing Officer or Director

Date