

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 02, 2006 8:00 am**  
**Secretary of State**

05-02-2006 90215 027 \*\*\*\*61.25

**DOCUMENT # N04000000183**

1. Entity Name  
**GREENS AT VIERA EAST CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business  
**901 N LAKE DESTINY DR  
MAITLAND, FL 32751**

Mailing Address  
**901 N LAKE DESTINY DR  
MAITLAND, FL 32751**

**60033048**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04142006 Chg-NP CR2E037 (11/05)

4. FEI Number  
**20-1002834**

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

**WEBB, ROBIN L  
901 N LAKE DESTINY DR  
STE 110  
MAITLAND, FL 32751**

7. Name and Address of New Registered Agent

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, 2006**

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

TITLE PD ☒ Delete  
NAME BARCHARD, CAROL  
STREET ADDRESS 1851 LONG IRON DR #927  
CITY-ST-ZIP VIERA, FL 32955

TITLE VPD ☒ Delete  
NAME OPPELT, DONALD  
STREET ADDRESS 1830 LONG IRON DR #706  
CITY-ST-ZIP VIERA, FL 32955

TITLE STD ☒ Delete  
NAME JEPSEN, NANCY  
STREET ADDRESS 1851 LONG IRON DR #905  
CITY-ST-ZIP VIERA, FL 32955

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Change ☒ Addition  
NAME Stermer, Ray  
STREET ADDRESS 1851 Long Iron Dr #924  
CITY-ST-ZIP Viera, FL 32955

TITLE VD ☐ Change ☒ Addition  
NAME Scelso, Jennifer  
STREET ADDRESS 5957 Barn Owl Court  
CITY-ST-ZIP Viera, FL 32955

TITLE TO ☐ Change ☒ Addition  
NAME Shaffer, James  
STREET ADDRESS 1841 Long Iron Dr # 822  
CITY-ST-ZIP Viera, FL 32955

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

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

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

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:

*Raymond A. Stermer*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*4/18/06*  
Date

*321-631-1350*  
Daytime Phone #