

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005419

FILED
Jan 25, 2008
Secretary of State

Entity Name: VILLAGE VIEW COMMUNITY FOUNDATION, INC.

Current Principal Place of Business:

8585 SE 147TH PLACE
SUMMERFIELD, FL 34491 US

New Principal Place of Business:

Current Mailing Address:

8585 SE 147TH PLACE
SUMMERFIELD, FL 34491 US

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BRYAN, JOE H
8585 SE 147TH PLACE
SUMMERFIELD, FL 34491 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: CD () Delete
Name: SHEA, JOHN M
Address: 813134 SE 93 TERR. RD.
City-St-Zip: SUMMERFIELD, FL 34491 US

Title: SD () Delete
Name: AMELING, LARRY
Address: 17723 SE 85TH ELLERBE AVE
City-St-Zip: THE VILLAGES, FL 32162 US

Title: D () Delete
Name: PRASCHAN, DUANE
Address: 2009 SANTO DOMINGO DR.
City-St-Zip: THE VILLAGES, FL 32159

Title: D () Delete
Name: ROWAN, HERB
Address: 9394 SE 162ND STREET
City-St-Zip: SUMMERFIELD, FL 34491

Title: D () Delete
Name: KILKELLY, CLO
Address: 17975 SE 88TH CASCADE CT
City-St-Zip: THE VILLAGES, FL 32162

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:

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: HERB ROWAN

D

01/25/2008

Electronic Signature of Signing Officer or Director

Date