

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010291

FILED
Jan 26, 2009
Secretary of State

Entity Name: THE VILLAGE CONDOMINIUMS ASSOCIATION, INC.

Current Principal Place of Business:

310 BLOUNT STREET
SUITE 108
TALLAHASSEE, FL 32301

New Principal Place of Business:

310 BLOUNT STREET
SUITE 111
TALLAHASSEE, FL 32301

Current Mailing Address:

P. O. BOX 15694
TALLAHASSEE, FL 32317

New Mailing Address:

FEI Number: 87-0762432

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REBER, TENAYA M
CORNERSTONE PROPERTY MANAGEMENT
310 BLOUNT STREET, SUITE 108
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

REBER, TENAYA M
CORNERSTONE PROPERTY MANAGEMENT
310 BLOUNT STREET, SUITE 111
TALLAHASSEE, FL 32301 US

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: TENAYA REBER

01/26/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: PAGOZALSKI, MIKE
Address: 810 SAINT MICHAELS ST
City-St-Zip: TALLAHASSEE, FL 32301

Title: DST () Delete
Name: ROSEN, PETER
Address: 423 ALL SAINTS ST
City-St-Zip: TALLAHASSEE, FL 32301

Title: DV () Delete
Name: HODGES, DANA
Address: 423 ALL SAINTS ST
City-St-Zip: TALLAHASSEE, FL 32301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: PAGOZALSKI, MIKE
Address: P.O. BOX 11070
City-St-Zip: TALLAHASSEE, FL 32302

Title: DST (X) Change () Addition
Name: ROSEN, PETER
Address: P.O. BOX 15694
City-St-Zip: TALLAHASSEE, FL 32317

Title: DV (X) Change () Addition
Name: HODGE, DANA
Address: P.O. BOX 15694
City-St-Zip: TALLAHASSEE, FL 32317

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: PETER ROSEN

D

01/26/2009

Electronic Signature of Signing Officer or Director

Date