2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N07000011711

City-St-Zip:

NORTH VENICE, FL 34275

The Hiled Apr 14, 2009
Secretary of State

Entity Name: VG&RC COMMUNITY ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 117 MARTELLAGO DRIVE 899 WOODBRIDGE DRIVE NORTH VENICE, FL 34275 VENICE, FL 34293 **Current Mailing Address: New Mailing Address:** 117 MARTELLAGO DRIVE 899 WOODBRIDGE DRIVE NORTH VENICE, FL 34275 VENICE, FL 34293 FEI Number: 26-1531448 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HAPPER, M. MARSHALL III ADVANCED MANAGEMENT OF SW FL INC 117 MARTELLAGO DRIVE 899 WOODBRIDGE DRIVE US NORTH VENICE, FL 34275 VENICE, FL 34293 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: DOUGLAS WILSON 04/14/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DP () Delete () Change () Addition MOECKEL, JOHN Name: Name: 185 TREVISO COURT Address: Address: City-St-Zip: NOTH VENICE, FL 34275 City-St-Zip: Title: () Delete Title: () Change () Addition Name: RIGDON, MICHAEL Name: Address: 118 TREVISO COURT Address: City-St-Zip: NORTH VENICE, FL 34275 City-St-Zip: Title: () Delete Title: () Change () Addition HAPPER, M. MARSHALL III Name: Name: Address: 117 MARTELLAGO DRIVE Address: City-St-Zip: NORTH VENICE, FL 34275 City-St-Zip: Title: DS () Delete Title: () Change () Addition Name: JONES, THOMAS W Name: Address: 338 MONTELLUNA DRIVE Address:

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.

City-St-Zip:

SIGNATURE: MICHAEL RIGDON DV 04/14/2009