

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000012160

FILED
Jan 06, 2009
Secretary of State

Entity Name: VILLAGE DRIVE PROFESSIONAL CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2825 BUSINESS CENTER BLVD., SUITE B5
MELBOURNE, FL 32940

New Principal Place of Business:

2825 BUSINESS CENTER BLVD., SUITE B5
MELBOURNE, FL 32940

Current Mailing Address:

2825 BUSINESS CENTER BLVD., SUITE B5
MELBOURNE, FL 32940

New Mailing Address:

2825 BUSINESS CENTER BLVD., SUITE B5
MELBOURNE, FL 32940

FEI Number: 26-1727830

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICHARDSON, BARRY
2825 BUSINESS CENTER BLVD., SUITE B5
MELBOURNE, FL 32940 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: PD () Delete
Name: HALEY, JOHN
Address: P. O. BOX 410558
City-St-Zip: MELBOURNE, FL 32941

Title: VSD () Delete
Name: RICHARDSON, BARRY
Address: 2825 BUSINESS CENTER BLVD., SUITE B5
City-St-Zip: MELBOURNE, FL 32940

Title: TD () Delete
Name: KENDUST, RICK
Address: 3507 CAPPJO DR.
City-St-Zip: MELBOURNE, FL 32940

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:

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: BARRY F RICHARDSON

MGR

01/06/2009

Electronic Signature of Signing Officer or Director

Date