

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 05, 2008 8:00 am**  
**Secretary of State**

02-05-2008 90008 046 \*\*\*\*61.25

**DOCUMENT # N21253**

1. Entity Name  
**VILLAGE GROVE PROPERTY OWNER ASSOCIATION  
INCORPORATED**



Principal Place of Business  
**% MARY C. WHEELER  
38718 VULCAN CIRCLE  
ZEPHYRHILLS, FL 33542**

Mailing Address  
**% MARY C. WHEELER  
38718 VULCAN CIRCLE  
ZEPHYRHILLS, FL 33542**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01212008 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number  
**65-0010228**

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**VERNEY, GEORGE A  
38733 VULCAN CIR  
ZEPHYRHILLS, FL 33542**

Name **MARY C. Wheeler**  
Street Address (P.O. Box Number is Not Acceptable)  
**38736 Vulcan Circle**  
City **Zephyrhills** FL Zip Code **33542**

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

*Mary C. Wheeler*

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, 2008**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☒ Delete  
NAME **HUBBARD, LOIS A**  
STREET ADDRESS **38750 VULCAN CIR**  
CITY-ST-ZIP **ZEPHYRHILLS, FL 33542**

TITLE **P** ☒ Change ☐ Addition  
NAME **MARY C. Wheeler**  
STREET ADDRESS **38736 Vulcan Circle**  
CITY-ST-ZIP **Zephyrhills FL 33542**

TITLE **VP** ☒ Delete  
NAME **VARNEY, GEORGE**  
STREET ADDRESS **38733 VULCAN CIRCLE**  
CITY-ST-ZIP **ZEPHYRHILLS, FL 33542**

TITLE **VP** ☒ Change ☐ Addition  
NAME **Purdon, ISOBEL**  
STREET ADDRESS **38704 Granger Lane**  
CITY-ST-ZIP **Zephyrhills FL 33542**

TITLE **S** ☐ Delete  
NAME **NICKERSON, KAROL**  
STREET ADDRESS **38723 VULCAN CIR**  
CITY-ST-ZIP **ZEPHYRHILLS, FL 33542**

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

TITLE **T** ☐ Delete  
NAME **GERACI, NANCY**  
STREET ADDRESS **38763 VULCAN CIR**  
CITY-ST-ZIP **ZEPHYRHILLS, FL 33542**

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

TITLE **D** ☐ Delete  
NAME **JAROS, JEAN**  
STREET ADDRESS **38730 VULCAN CIR**  
CITY-ST-ZIP **ZEPHYRHILLS, FL 33542**

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

TITLE **D** ☒ Delete  
NAME **DRUM, HERB**  
STREET ADDRESS **38720 VULCAN CIR**  
CITY-ST-ZIP **ZEPHYRHILLS, FL 33542**

TITLE **D** ☒ Change ☒ Addition  
NAME **HOP, GLENN**  
STREET ADDRESS **38732 Vulcan Circle**  
CITY-ST-ZIP **Zephyrhills FL 33542**

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:

*Mary C. Wheeler*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/21/08

Date

813-788-7408

Daytime Phone #