

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21253

FILED
Jan 07, 2009
Secretary of State

Entity Name: VILLAGE GROVE PROPERTY OWNER ASSOCIATION INCORPORATED

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

FEI Number: 65-0010228

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHELLER, MARY C
38736 VULCAN CIRCLE
ZEPHYRHILLS, FL 33542 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: P () Delete
Name: WHEELER, MARY C
Address: 38736 VUCAN CIRCLE
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: VP () Delete
Name: PURDON, ISOBEL
Address: 38704 GRANGER LANE
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: S () Delete
Name: NICKERSON, KAROL
Address: 38723 VULCAN CIR
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: T () Delete
Name: GERACI, NANCY
Address: 38763 VULCAN CIR
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: D () Delete
Name: JAROS, JEAN
Address: 38730 VULCAN CIR
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: D () Delete
Name: HOP, GLEN
Address: 38732 VULCAN CIRCLE
City-St-Zip: ZEPHYRHILLS, FL 33542

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
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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: MARY C. WHEELER

PRES

01/07/2009

Electronic Signature of Signing Officer or Director

Date