

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 23, 2008 8:00 am
Secretary of State

01-23-2008 90011 008 ****61.25

DOCUMENT # N34329

1. Entity Name

VILLA COSTA CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

3210 S OCEAN BLVD
3210 S. OCEAN BLVD.
HIGHLAND BEACH, FL 33487 US

Mailing Address

VILLA COSTA CONDO. ASSN.
3210 S OCEAN BLVD
HIGHLAND BEACH, FL 33487 US



01142008 No Chg-NP

CR2E037 (4/06)

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4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GROSS, WILLIAM
3210 S OCEAN BLVD
HIGHLAND BEACH, FL 33487

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IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	FELDMAN, CARL
STREET ADDRESS	3210 S OCEAN BLVD
CITY-ST-ZIP	BOCA RATON, FL 33487
TITLE	T
NAME	GROSS, WILLIAM
STREET ADDRESS	3210 S OCEAN BLVD
CITY-ST-ZIP	HIGHLAND BEACH, FL 33487
TITLE	S
NAME	BENNETT, HILDA
STREET ADDRESS	3210 S. OCEAN BLVD
CITY-ST-ZIP	HIGHLAND BEACH, FL 33487
TITLE	D
NAME	WEINER, ILENE
STREET ADDRESS	3210 S. OCEAN BLVD.
CITY-ST-ZIP	HIGHLAND BEACH, FL 33487
TITLE	VP
NAME	COLBY, JOSEPH
STREET ADDRESS	3210 S. OCEAN BLVD
CITY-ST-ZIP	HIGHLAND BEACH, FL 33487
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #