2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2009
Secretary of State

DOCUMENT# N98000001522

Entity Name: VILLAGE SQUARE PROFESSIONAL PARK PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

400 VILLAGE SQUARE XING
SUITE 1
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

Current Mailing Address:

400 VILLAGE SQUARE XING
SUITE 1
PALM BEACH GARDENS, FL 33418

New Mailing Address:

FEI Number: 65-0992282 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAMERAU, MARK T DMD
400 VILLAGE SQUARE XING
SUITE 1
PALM BEACH GARDENS, FL 33418 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:	DAMERAU, MARK T DMD	
Address:	400 VILLAGE SQUARE XING,STE.1	
City-St-Zip:	PALM BEACH GARDENS, FL 33418	
Title:	VPD	( ) Delete
Name:	RIETWYK, TOM	
Address:	100 VILLAGE SQUARE XING	
City-St-Zip:	PALM BEACH GARDENS, FL 33418	
Title:	SD	( ) Delete
Name:	BENDICK, OSCAR	
Address:	5839 WHIRLAWAY RD.	
City-St-Zip:	PALM BEACH GARDENS, FL 33418	
Title:	D	( ) Delete
Name:	DE SETTO, FRANK	
Address:	800 VILLAGE SQUARE XING	
City-St-Zip:	PALM BEACH GARDENS, FL 33418	

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
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: MARK T. DAMERAU PART 01/07/2009

Electronic Signature of Signing Officer or Director — Date