## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000002147

FILED Jun 25, 2009 Secretary of State

Entity Name: VIRGINIA BEACH RESORT OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

Current Mailing Address: New Mailing Address:

PO BOX 223654 HOLLYWOOD, FL 33022

FEI Number: 65-0915119 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GLAZER, ERIC M 20801 BISCAYNE BLVD. 4TH FLOOR AVENTURA, FL 33180 US

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:

Flackway is Competing of Devictors of Appet

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition Name: GRIMECH, CONNIE Name: GREMICH, CONNIE

 Address:
 335 VIRGINIA ST
 Address:
 335 VIRGINIA ST

 City-St-Zip:
 HOLLYWOOD, FL 33019
 City-St-Zip:
 HOLLYWOOD, FL 33019

Title: VD ( ) Delete Title: VD (X) Change ( ) Addition

 Name:
 ROTHLEIN, STEVE
 Name:
 KELLY, VALERIE

 Address:
 349 VIRGINIA ST
 Address:
 355 VIRGINIA ST

 City-St-Zip:
 HOLLYWOOD, FL 33019
 City-St-Zip:
 HOLLYWOOD, FL 33019

Title: SDTD ( ) Delete Title: SDTD (X) Change ( ) Addition

 Name:
 MANTER, DANIEL A
 Name:
 CANNIS, JERRY

 Address:
 347 VIRGINIA ST.
 Address:
 339 VIRGINIA ST.

 City-St-Zip:
 HOLLYWOOD, FL 33019
 City-St-Zip:
 HOLLYWOOD, FL 33019

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: CONNIE GREMICH PD 06/25/2009