

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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

04-23-2008 90044 025 ****61.25

DOCUMENT # N98000002170

1. Entity Name
GLOBAL VILLAGE HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business
**1860 VINA CT
CHULUOTA, FL 32766**

Mailing Address
**1860 VINA CT
CHULUOTA, FL 32766**

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

1879 Vina Ct.

3. Mailing Address

1879 Vina Ct.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04092008

Chg-NP

CR2E037 (12/06)

City & State

Chuluota FL

City & State

Chuluota FL

4. FEI Number

59-3507933

Applied For

Not Applicable

Zip
32766

Country
Seminole

Zip
32766

Country
Seminole

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**STEPHAN, REINHARD G
2699 LEE ROAD SUITE 540
WINTER PARK, FL 32789**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
NGUYEN, TROY
1878 VINA CT
CHULUOTA, FL 32766** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
MITCHELL, KAREN
1860 VINA CT
CHULUOTA, FL 32766** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
PHOMMACHANH, KOMALY
1891 VINA CT
CHULUOTA, FL 32766** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
Nguyen, Troy
1879 Vina Ct.
Chuluota, FL 32766** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
Robert Starr
1878 Vina Ct.
Chuluota, FL 32766** ☐ Change ☒ Addition

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

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

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

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

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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-9-08

Date

407-359-3129

Daytime Phone #