

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 27, 2008 8:00 am
Secretary of State

03-27-2008 90047 001 ***150.00
03-27-2008 90047 002 *****8.75

DOCUMENT # P07000006124

1. Entity Name

VILLAGE REFERRAL, INC.



Principal Place of Business

11714 NE 62ND TERR., SUITE 300
VILLAGE FL 32162

Mailing Address

11714 NE 62ND TERR., SUITE 300
VILLAGE FL 32162

2. Principal Place of Business - No P.O. Box #
11714 N.E. 62ND Terr.

Suite, Apt. #, etc.

Suite 300

City & State
The Villages, FL

Zip
32162

Country
USA

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

Same

1st MOORE

CR2E034 (10/07)

4. FEI Number

289525732

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

OKRUHLICA, DEBBIE
11714 NE 62ND TERR., SUITE 300
VILLAGE FL 32162

7. Name and Address of New Registered Agent

Name

N/A

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

Debbie Okruhlica

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

(NOTE: Registered Agent Signature required when reinstating)

DATE

03/14/08

FILE NOW!!! FEE IS \$150.00

After May 1, 2008 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PS
NAME OKRUHLICA, DEBBIE
STREET ADDRESS 11714 NE 62ND TERR., SUITE 300
CITY-ST-ZIP VILLAGE FL 32162 ☐ Delete

TITLE P
NAME STEIN, GLENN
STREET ADDRESS 11714 NE 62ND TERR., SUITE 300
CITY-ST-ZIP VILLAGE FL 32162 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME The only change is
STREET ADDRESS the deletion of Glenn
CITY-ST-ZIP Stern ☐ Delete

TITLE
NAME He is no longer
STREET ADDRESS with us. ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRESIDENT
NAME Debbie Okruhlica
STREET ADDRESS 11714 NE 62ND TERR., SUITE 300
CITY-ST-ZIP VILLAGE FL 32162 ☐ Change ☐ Addition

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

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

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 607, 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

Debbie Okruhlica

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/14/08

Date

Daytime Phone #