

**FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1997**



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

97 JUL 31 AM 11:42

**DOCUMENT #** P96000013523

1. Corporation Name

Village Associates, Inc.

Principal Place of Business

Mailing Address

7500 Red Road, Suite 2-A  
South Miami, Florida 33143

SAME AS PRINCIPAL

BK 7/31/97

2. Principal Place of Business

21 7800 Red Road,

Suite, Apt. #, etc.

22 #119

23 City & State  
South Miami, FL

24 Zip  
33143

25 Country  
USA

2a. Mailing Address

26 7800 Red Road,

Suite, Apt. #, etc.

27 #119

28 City & State  
South Miami, FL

29 Zip  
33143

30 Country  
USA

3. Date Incorporated or Qualified  
02-13-96

3a. Date of Last Report

4. FEI Number  
65-0648105

Applied For  
Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

John Sumberg  
200 S. Biscayne Blvd., Suite 2500  
Miami, Florida 33131

81 Name  
Martin Fine

82 Street Address (P.O. Box Number is Not Acceptable)  
701 Brickell Avenue, Suite 3000

83

84 City  
Miami

FL

85 Zip Code  
33131

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

MARTIN FINE, DIRECTOR

7/30/97

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

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE  
NAME Martin Fine  
STREET ADDRESS 701 Brickell Avenue, Suite 3000  
CITY-ST-ZIP Miami, FL 33131

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE D ☐ DELETE  
NAME Gerald Gould  
STREET ADDRESS 7800 Red Road, Suite #119  
CITY-ST-ZIP Miami, Florida 33143

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS 7800 Red Road, Suite 119  
2.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS 700002256467--1  
-08/04/97--01092--020  
\*\*\*\*173.75 \*\*\*\*173.75  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

MARTIN FINE, DIRECTOR

PREVIOUSLY FILED ON 5/8/97  
7/30/97

CR2F034 (9/96)