## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#717919** 

FILED Apr 07, 2009 Secretary of State

Entity Name: FLORIDA APARTMENT ASSOCIATION, INC.

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

341 N MAITLAND AVE STE 130 MAITLAND, FL 32751

Current Mailing Address: New Mailing Address:

341 N MAITLAND AVE STE 130 MAITLAND, FL 32751

FEI Number: 59-1309017 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CROW-SEAGAL, PAT

341 N MAITLAND AVE STE 130

MAITLAND, FL 32751 US

CROW-SEGAL, PAT

341 N MAITLAND AVE STE 130

MAITLAND, FL 32751 US

MAITLAND, FL 32751 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: PAT CROW-SEGAL 04/07/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 VPD () Delete
 Title:
 PED (X) Change () Addition

 Name:
 FREDLUND, CINDY
 Name:
 FREDLUND, CINDY

 Address:
 250 BELLE CHASE CIRCLE
 Address:
 250 BELLE CHASE CIRCLE

 City-St-Zip:
 TAMPA, FL 33634
 City-St-Zip:
 TAMPA, FL 33634

Title: PD ( ) Delete Title: PPD (X) Change ( ) Addition

Name: OGIER, MARK Name: OGIER, MARK

Address: 100 COLONIAL CENTER PLWY #415 Address: 100 COLONIAL CENTER PLWY #415

City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: LAKE MARY, FL 32746

Title: PPD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 DECKER, MARK
 Name:

 Address:
 555 WINDERLY PLACE # 415
 Address:

 City-St-Zip:
 MAITLAND, FL 32751
 City-St-Zip:

Title: PPD ( ) Delete Title: STD (X) Change ( ) Addition

 Name:
 RATCHFORD, KATHY
 Name:
 TRUESDALE, SUSAN

 Address:
 5950 HAZELTINE NATIONAL DR, # 157
 Address:
 13758 ORION COURT

 City-St-Zip:
 ORLANDO, FL 32822
 City-St-Zip:
 HUDSON, FL 34667

Title: PED ( ) Delete Title: P (X) Change ( ) Addition

Name:GALLAGHER, BRENDAName:GALLAGHER, BRENDAAddress:7645 GATE PKWY, # 202Address:7645 GATE PKWY, # 202City-St-Zip:JACKSONVILLE, FL 32256City-St-Zip:JACKSONVILLE, FL 32256

Title: PPD ( ) Delete Title: VP (X) Change ( ) Addition Name: SMITH. MARK Name: JACKSON, KELLIE

 Name:
 SMITH, MARK
 Name:
 JACKSON, KELLIE

 Address:
 350 W PINE ST
 Address:
 4925 BLACKHAWK DRIVE

 City-St-Zip:
 ORLANDO, FL 32801
 City-St-Zip:
 ST. JOHNS, FL 32259

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: BRENDA GALLAGHER P 04/07/2009