

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 13, 2005 8:00 am
Secretary of State

07-13-2005 90014 024 ****61.25

DOCUMENT # 764221 1. Entity Name AZALEA LANE CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 1086 AZALEA LANE WINTER PARK, FL 32789			Mailing Address 1086 AZALEA LANE WINTER PARK, FL 32789		
2. Principal Place of Business 1084 - 1096 Azalea Ln Suite, Apt. #, etc.		3. Mailing Address 1094 Azalea Ln Suite, Apt. #, etc.			
City & State Winter Park Florida Zip 32789		City & State Winter Park FL Zip 32789		4. FEI Number 29-4436311	
Country US		Country US		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CASEY, JENNIFER 1086 AZALEA LANE WINTER PARK, FL 32789				7. Name and Address of New Registered Agent Name RHOADS, MYRTLE Street Address (P.O. Box Number is Not Acceptable) 1094 Azalea Ln City Winter Park FL Zip Code 32789	
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 <u><i>Myrtle Rhoads</i></u> Myrtle Rhoads, President <u>7/11/05</u> 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 September 7, 2005		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE PD NAME CASEY, JENNIFER STREET ADDRESS 1086 AZALEA LANE CITY-ST-ZIP WINTER PARK, FL 32789	☒ Delete		TITLE D NAME Casey, Jennifer STREET ADDRESS 1086 Azalea Ln CITY-ST-ZIP Winter Park FL 32789	☒ Change ☐ Addition	
TITLE SD NAME HORNER, JOANNE STREET ADDRESS 1084 AZALEA LANE CITY-ST-ZIP WINTER PARK, FL 32789	☒ Delete		TITLE D NAME Myrtle Rhoads Roberts, Malcolm STREET ADDRESS 1094 Azalea Ln CITY-ST-ZIP Winter Park FL 32789	☐ Change ☒ Addition	
TITLE D NAME RHOADS, MYRTLE STREET ADDRESS 1094 AZALEA LANE CITY-ST-ZIP WINTER PARK, FL 32789	☐ Delete		TITLE PD NAME Rhoads, Myrtle STREET ADDRESS 1094 Azalea Ln CITY-ST-ZIP Winter Park FL 32789	☒ Change ☐ Addition	
TITLE T NAME CASEY, JENNIFER STREET ADDRESS 1086 AZALEA LANE CITY-ST-ZIP WINTER PARK, FL 32789	☒ Delete		TITLE TD NAME Miller, Juanita STREET ADDRESS 1096 Azalea Ln CITY-ST-ZIP Winter Park FL 32789	☒ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		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 exemption stated in Section 119.07(3)(i), 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: <u><i>Myrtle Rhoads</i></u> President Myrtle Rhoads <u>7/11/05</u> <u>407 644 7528</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					