2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764221

FILED Mar 23, 2009 Secretary of State

Entity Name: AZALEA LANE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 1084-1096 AZALEA LANE WINTER PARK, FL 32789 **Current Mailing Address: New Mailing Address:** 1086 AZALEA LANE 1094 AZALEA LANE WINTER PARK, FL 32789 WINTER PARK, FL 32789 FEI Number: 29-4436311 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: RHOADS, MYRTLE CASEY, JENNIFER A MS. 1094 AZALEA LANE 1086 AZALEA LANE WINTER PARK, FL 32789 WINTER PARK, FL 32789 US 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: JENNIFER A. CASEY 03/23/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Delete () Change () Addition CASEY, JENNIFER Name: Name: 1086 AZALEA LANE Address: Address: City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: Title: () Delete Title: () Change () Addition ROBERTS, MALCOLM Name: Name: Address: 1084 AZALEA LANE Address: City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: Title: PTD () Delete Title: () Change () Addition RHOADS, MYRTLE Name: Name: 1094 AZALEA LANE Address: Address: City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: Title: () Delete Title: () Change () Addition MURPHY, BRIAN Name: Name: Address: 1096 AZALEA LANE Address: City-St-Zip: WINTER PARK, FL 32789 City-St-Zip:

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: JENNIFER A. CASEY D 03/23/2009