2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2007
Secretary of State

DOCUMENT# N00000007658

Entity Name: APOPKA-VINELAND ROAD LANDSCAPE MAINTENANCE COMMITTEE, INC.

Current Principal Place of Business:

831 PLAM COVE DR
ORLANDO, FL 32835

New Principal Place of Business:

831 PALM COVE DR
ORLANDO, FL 32835

Current Mailing Address:

831 PLAM COVE DR
ORLANDO, FL 32835

New Mailing Address:

831 PALM COVE DR
ORLANDO, FL 32835

FEI Number: 59-3750598 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HUBER, RICHARD
831 PALM COVE DR
ORLANDO, FL 32835 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: V ( ) Delete
Name: BURNS, JAMES
Address: 512 WHEATSTONE PLACE
City-St-Zip: ORLANDO, FL 32835 US

Title: P ( ) Delete
Name: HUBER, RICHARD
Address: 881 PALM COVE DR
City-St-Zip: ORLANDO, FL 32835 US

Title: T ( ) Delete
Name: COSTELLO, JIM
Address: 1708 WESTOVER RESERVE BLVD.
City-St-Zip: WINDERMERE, FL 34786 US

Title: S ( ) Delete
Name: CARTER, DEBBIE
Address: 8101 WINDSOR RIDGE RD
City-St-Zip: ORLANDO, FL 32835 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES P. COSTELLO T 02/08/2007

Electronic Signature of Signing Officer or Director — Date