

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003304

FILED
Jun 18, 2007
Secretary of State

Entity Name: THE AHALI PLACE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

3110 1ST AVE NORTH, STE 5W
ST PETERSBURG, FL 33713

New Principal Place of Business:

Current Mailing Address:

3110 1ST AVE NORTH, STE 5W
ST PETERSBURG, FL 33713

New Mailing Address:

FEI Number: 20-0907527 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ROUSON, DARRYL E
3110 1ST AVE NORTH
STE 5W
ST PETERSBURG, FL 33713 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FLAKES, MALCOM
Address: 3110 1ST AVE NORTH, STE 5W
City-St-Zip: ST PETERSBURG, FL 33713

Title: D () Delete
Name: ROUSON, DARRYL E
Address: 3110 1 CT AVENUE N, SUITE
City-St-Zip: SAINT PETERSBURG, FL 33713

Title: D () Delete
Name: ROUSON, ANGELA
Address: 3110 1ST AVE NORTH, STE 5W
City-St-Zip: ST PETERSBURG, FL 33713

Title: SD () Delete
Name: FLAKES, GLORIA
Address: 3110 1ST AVENUE N, SUITE 5W
City-St-Zip: SAINT PETERSBURG, FL 33713

Title: TD () Delete
Name: GORDON, EVYAN
Address: 3110 1ST AVENUE N, SUITE 5W
City-St-Zip: SAINT PETERSBURG, FL 33713

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:

Title: () Change () Addition
Name:
Address:
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: DARRYL E. ROUSON

D

06/18/2007

Electronic Signature of Signing Officer or Director

Date