

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002002

FILED  
Mar 04, 2010  
Secretary of State

**Entity Name:** VILLAGEWALK AT LAKE NONA HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

8524 INSULAR LN.  
ORLANDO, FL 32827 US

**New Principal Place of Business:**

**Current Mailing Address:**

2391 PONTIAC ROAD  
AUBURN HILLS, MI 48326 US

**New Mailing Address:**

ACCESS RESIDENTIAL MANAGEMENT  
5728 MAJOR BOULEVARD, SUITE 502  
ORLANDO, FL 32819 US

FEI Number: 54-2169781

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TAYLOR & CARLS, P.A.  
150 N. WESTMONTE DRIVE  
ALTAMONTE SPRINGS, FL 32714 US

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

CAPLAN, BARRY PRES  
ACCESS RESIDENTIAL MANAGEMENT  
5728 MAJOR BOULEVARD, SUITE 502  
ORLANDO, FL 32819 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: BARRY CAPLAN

03/04/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P/T  
Name: MAPILI, BERNIE  
Address: 2301 LUCIEN WAY #400  
City-St-Zip: MAITLAND, FL 32751 US

Title: VP  
Name: SMITH, ADAM  
Address: 3810 NORTHDAL E BOULEVARD STE 100  
City-St-Zip: TAMPA, FL 33624 US

Title: S  
Name: CHOMA, DEBRA  
Address: 2301 LUCIEN WAY #400  
City-St-Zip: MAITLAND, FL 32751

I hereby 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 all other like empowered.

SIGNATURE: BERNIE MAPILI

P

03/04/2010

Electronic Signature of Signing Officer or Director

Date