

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000009204

**FILED**  
**Mar 17, 2011**  
**Secretary of State**

**Entity Name:** APSHAWA VIEW SUBDIVISION HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

300 E. DIVISION STREET  
MINNEOLA, FL 34755

**New Principal Place of Business:**

3745 HWY 27  
CLERMONT, FL 34711

**Current Mailing Address:**

POST OFFICE BOX 120978  
CLERMONT, FL 34712

**New Mailing Address:**

**FEI Number:** 20-4835606

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

KOCIELKO, BONITA M  
300 E. DIVISION STREET  
MINNEOLA, FL 34755 US

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

KOCIELKO, BONITA M  
3745 HWY 27  
CLERMONT, FL 34711 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: BONITA M. KOCIELKO

03/17/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: KOCIELKO, JERRY  
Address: 3745 HWY 27  
City-St-Zip: CLERMONT, FL 34711

Title: VSTD  
Name: THOMPSON, ROBERT  
Address: 11905 EGRET BLUFF  
City-St-Zip: CLERMONT, FL 34711

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: JEROME KOCIELKO

PD

03/17/2011

Electronic Signature of Signing Officer or Director

Date