

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004110

FILED
Feb 11, 2009
Secretary of State

Entity Name: NONA PRESERVE TOWNHOMES OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

5955 T.G. LEE BLVD.
SUITE 300
ORLANDO, FL 32822

New Principal Place of Business:

5401 S. KIRKMAN ROAD
STE. 450
ORLANDO, FL 32819

Current Mailing Address:

5955 T.G. LEE BLVD.
SUITE 300
ORLANDO, FL 32822

New Mailing Address:

5401 S. KIRKMAN ROAD
STE. 450
ORLANDO, FL 32819

FEI Number: 01-0863081

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LELAND MANAGEMENT
5955 T.G. LEE BLVD.
SUITE 300
ORLANDO, FL 32822 US

Name and Address of New Registered Agent:

COMMUNITY MANAGEMENT PROFESSIONALS, INC.
5401 S. KIRKMAN ROAD
STE. 450
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: KAREN SFARA

02/11/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GOLDBERG, ALAN
Address: 111 S. MAITLAND AVE., SUITE 101
City-St-Zip: MAITLAND, FL 32751

Title: VD () Delete
Name: COLE, WILLIAM
Address: 111 S. MAITLAND AVE., SUITE 101
City-St-Zip: MAITLAND, FL 32751

Title: STD () Delete
Name: KAHAN, MICHELLE
Address: 111 S. MAITLAND AVE., SUITE 101
City-St-Zip: MAITLAND, FL 32751

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GOLDBERG, ALAN
Address: 111 S. MAITLAND AVE., SUITE 101
City-St-Zip: MAITLAND, FL 32751

Title: VP (X) Change () Addition
Name: COLE, WILLIAM
Address: 111 S. MAITLAND AVE., SUITE 101
City-St-Zip: MAITLAND, FL 32751

Title: ST (X) Change () Addition
Name: KAHAN, MICHELLE
Address: 111 S. MAITLAND AVE., SUITE 101
City-St-Zip: MAITLAND, FL 32751

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: ALAN GOLDBERG

P

02/11/2009

Electronic Signature of Signing Officer or Director

Date