

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06861

FILED
Apr 02, 2009
Secretary of State

Entity Name: ACORN VILLAGE MANAGEMENT, INC.

Current Principal Place of Business:

4004 EDGEWATER DRIVE
ORLANDO, FL 328042837

New Principal Place of Business:

4004 EDGEWATER DRIVE
ORLANDO, FL 32804

Current Mailing Address:

4004 EDGEWATER DRIVE
ORLANDO, FL 328042837

New Mailing Address:

4004 EDGEWATER DRIVE
ORLANDO, FL 32804

FEI Number: 59-2581821

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASSET REAL ESTATE INC.
4004 EDGEWATER DR
ORLANDO, FL 32804 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: PD () Delete
Name: MOORE, ARTHUR
Address: 3401 ALISSA COURT
City-St-Zip: ORLANDO, FL 32808

Title: TD () Delete
Name: GOWERS, SUSAN
Address: 4948 SANOMA VILLAGE
City-St-Zip: ORLANDO, FL 32808

Title: D (X) Delete
Name: DROY, CHRISTINE
Address: 4954 SILVER OAKS VILLAGE
City-St-Zip: ORLANDO, FL 32808

Title: SD () Delete
Name: FRAISER, MICHELLE
Address: 4960 SONOMA VILLAGE
City-St-Zip: ORLANDO, FL 32808

Title: VPD () Delete
Name: POLKE, CHRISTOPHER
Address: 4942 SANOMA VILLIAGE
City-St-Zip: ORLANDO, FL 32808

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: ARTHUR MOORE

PD

04/02/2009

Electronic Signature of Signing Officer or Director

Date