2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 30, 2008 8:00 am Secretary of State

DOCUMENT # N07000012027 1. Entity Name ALEXIS CENTRE LAND CONDOMINIUM ASSOCIATION, INC.						94-30-2008	3 90203 030 * ¹	***61	.25
Principal Place of Business 1618 MAHAN CENTER BLVD SUITE 103 TALLAHASSEE, FL 32308		Mailing Address 1618 Mahan Center Blvd Suite 103 Tallahassee, FL 32308		1 (887) 61 83 4 83	-				
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address	•						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04282008	04282008 Chg-NP CR2E037 (12/06)				
City & State		City & State		·	4. FEI Number	(6113	09		oplied For ot Applicable
Zip	Country	Zip	Coun	ntry	5. Certificate of S	status Desired		75 Add Require	ditional
	6. Name and Address of Current	Registered Agent			7. Name and Ad	dress of New	Registered Agen		
DALMED	ID WALDOLL			Name					
PALMER, JR., WALDO H 1618 MAHAN CENTER BLVD SUITE 103 TALLAHASSEE, FL 32308				Street Address (P.O. Box Number is Not Acceptable)					
			 	City			FL ²	ip Code	e
8. The above the obligat	named entity submits this statement for ions of registered agent.	r the purpose of changing i	its registered	d office or reg	istered agent, or both, i	n the State of F	Florida. I am famili	ar with, ${\cal B}$	and accept
	Signature, typed or printed name of registered agent	end title if applicable.	OTE: Registered	Agent signature rec	quired when reinstating)		DATE		
	Signature, typed or printed name of regisfered aggs Filling Fee Is \$61.25 Due by May 1, 2008	9. Election C		nancing _	\$5.00 May Be Added to Fees		Make check pay		
10.	Filing Fee is \$61.25	9. Election Ci Trust Fund	ampaign Fin	nancing	\$5.00 May Be	. Flo	orida Departmer	t of St	tate
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Ci Trust Fund	ampaign Fin I Contribution 11. TITLE NAME	nancing in. T ADDRESS	\$5.00 May Be Added to Fees	. Flo	orida Departmer	t of St	tate
TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2008 OFFICERS AND DIE DP DEAN, D.WILSON 3013 THOMASVILLE RD	9. Election Ci Trust Fund	ampaign Find Contribution 11. TITLE NAME STREET CITY-S TITLE NAME	nancing on. I ADDRESS ST-ZIP	\$5.00 May Be Added to Fees	. Flo	CERS AND DIRECT	nt of SI ORS IN	tate I 10
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12. 1 hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED MAKE OF SIGNING PRICER OR DIRECTOR

4/21/08

Daytime Phone #