

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32921

FILED  
Mar 08, 2010  
Secretary of State

**Entity Name:** LAKES OF ALOMA HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

2180 WEST SR 434  
SUITE 5000  
LONGWOOD, FL 327795044 US

**New Principal Place of Business:**

**Current Mailing Address:**

2180 WEST SR 434  
SUITE 5000  
LONGWOOD, FL 327795044 US

**New Mailing Address:**

**FEI Number:** 59-2957801      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

HART, JAMES W JR  
SENTRY MANAGEMENT INC.  
2180 WEST SR 434, SUITE 5000  
LONGWOOD, FL 32779 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  
Name: GIARRUSSO, SUSAN  
Address: 5429 BIRCHBEND LOOP  
City-St-Zip: OVIEDO, FL 32765

Title: SD  
Name: WHALING, ROBERT  
Address: 9521 BELMONT TER  
City-St-Zip: OVIEDO, FL 32765

Title: TD  
Name: WEAST, SHERI  
Address: 5392 ENDICOTT PL  
City-St-Zip: OVIEDO, FL 32765

Title: D  
Name: RUBY, STEVE  
Address: 5421 ENDICOTT PL  
City-St-Zip: OVIEDO, FL 32765

Title: VPD  
Name: STANTON, DONOVAN  
Address: 5473 BAYTOWNE PL  
City-St-Zip: OVIEDO, FL 32765

Title: D  
Name: PARRISH, DANA  
Address: 5479 BAYTOWNE PL  
City-St-Zip: OVIEDO, FL 32765

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: SUSAN GIARRUSSO

PD

03/08/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date