

DOCUMENT # N49147

1. Entity Name

VALENCIA PLACE HOMEOWNER'S ASSOCIATION, INC.

FILED
Apr 04, 2000 8:00 am
Secretary of State

04-04-2000 90102 038 ****61.25

Principal Place of Business

Mailing Address

490 VALENCIA PLACE CIRCLE
ORLANDO FL 32825
US

P.O. BOX 677307
ORLANDO FL 32867-7307
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

7523 Aloma Avenue

3. Mailing Address

Suite, Apt. #, etc.
#210

Suite, Apt. #, etc.

City & State

Winter Park, FL

City & State

4. FEI Number

59-3182209

Applied For
Not Applicable

Zip

32792

Country

USA

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FRASCA, JOSEPH
7523 ALOMA AVENUE SUITE 210
WINTER PARK FL 32792

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

JOSEPH FRASCA

3/15/00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DP Delete
NAME HITCHCOCK, JOSEPH
STREET ADDRESS 490 VALENCIA PLACE CIRCLE
CITY-ST-ZIP ORLANDO FL

TITLE S/T/D Change Addition
NAME Susan Frost
STREET ADDRESS 629 Valencia Place Circle
CITY-ST-ZIP Orlando, FL 32825

TITLE DVP Delete
NAME MOWBRY, JOHN
STREET ADDRESS 556 VALENCIA PL CR
CITY-ST-ZIP ORLANDO FL 32825

TITLE D Change Addition
NAME John Mowbry
STREET ADDRESS 556 Valencia PL CR
CITY-ST-ZIP Orlando, FL 32825

TITLE STD Delete
NAME TIEDGE, CATHY
STREET ADDRESS 568 VALENCIA PLACE CIRCLE
CITY-ST-ZIP ORLANDO FL

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D Delete
NAME MARSDEN, JOHN
STREET ADDRESS 436 VALENCIA PLACE CI
CITY-ST-ZIP ORLANDO FL 32825

TITLE DP Change Addition
NAME John Marsden
STREET ADDRESS 436 Valencia Pl Cr
CITY-ST-ZIP Orlando, FL 32825

TITLE D Delete
NAME STOUGH, JASON
STREET ADDRESS 622 VALENCIA PLACE CIR
CITY-ST-ZIP ORLANDO FL 32825

TITLE DVP Change Addition
NAME Jason Stough
STREET ADDRESS 622 Valencia Pl Cr
CITY-ST-ZIP Orlando, FL 32825

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 REQUIRED
JOHN MARSDEN

3/15/00

907-448-7065

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #