

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004348

FILED
Mar 31, 2010
Secretary of State

Entity Name: EMERALD FOREST ORANGE COUNTY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

5401 S.. KIRKMAN RD.
STE. 450
ORLANDO, FL 32819 US

New Principal Place of Business:

Current Mailing Address:

5401 S.. KIRKMAN RD.
STE. 450
ORLANDO, FL 32819 US

New Mailing Address:

FEI Number: 59-3341611 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

COMMUNITY MANAGEMENT PROFESSIONAL, INC
5401 S KIRKMAN RD
SUITE 450
ORLANDO, FL 32819 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: P
Name: ROGERS, KEVIN
Address: 10113 CANOPY TREE CT
City-St-Zip: ORLANDO, FL 32836

Title: VP
Name: KIMMERLE, BARBARA
Address: 10434 AUTUMN GLEN COURT
City-St-Zip: ORLANDO, FL 32836

Title: T
Name: PASQUINELLI, MIA
Address: 8614 TARA OAKS COURT
City-St-Zip: ORLANDO, FL 32836

Title: S
Name: MORGAN, CAROLYN
Address: 8606 TERRANCE PINE COURT
City-St-Zip: ORLANDO, FL 32836

Title: D
Name: LOSCH, RANDY
Address: 10250 EMERALD WOODS AVE.
City-St-Zip: ORLANDO, FL 32836

Title: D
Name: HOWELLS, ROBERT
Address: 8621 FOREST RUN LN.
City-St-Zip: ORLANDO, FL 32836

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: KEVIN ROGERS

P

03/31/2010

Electronic Signature of Signing Officer or Director

_____ Date