2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008401

FILED Mar 15, 2006 Secretary of State

Entity Name: ALLIANCE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

7575 KINGSPOINTE PARKWAY SUITE 9 8421 S. ORANGE BLOSSOM TRAIL ORLANDO, FL 32819

SUITE 270

ORLANDO, FL 32809

Current Mailing Address: New Mailing Address:

8421 S. ORANGE BLOSSOM TRAIL SUITE 270 7575 KINGSPOINTE PARKWAY SUITE 9

ORLANDO, FL 32819

ORLANDO, FL 32809

FEI Number: 42-1688591 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BROWNING, DONALD E CARVALHO, ENIO

7575 KINGSPOINTE PARKWAY SUITE 9 8421 S. ORANGE BLOSSOM TRAIL SUITE 270

ORLANDO, FL 32819 ORLANDO, FL 32809 US

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: ENIO CARVALHO 03/15/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DS (X) Change () Addition () Delete

BARINAS, FROILAN BARINAS, FROILAN DR Name: Name: 8421 S ORANGE BLOSSOM TRAIL Address: 8421 S ORANGE BLOSSOM TRAIL#270 Address:

City-St-Zip: ORLANDO, FL 32809 City-St-Zip: ORLANDO, FL 32809

Title: () Delete Title:

(X) Change () Addition RAMPHAL, MOTIELAL Name: RAMPHAL, MOTIELAL Name:

Address: 8421 S ORANGE BLOSSOM TRAIL Address: 8421 S ORANGE BLOSSOM TRAIL#270

City-St-Zip: ORLANDO, FL 32809 City-St-Zip: ORLANDO, FL 32809

Title: DP () Delete Title: PD (X) Change () Addition CARVALHO, ENIO Name: CARVALHO, ENIO Name:

8421 S. ORANGE BLOSSOM TRAIL#270 518 LAKESCAPE CT Address: Address:

City-St-Zip: ORLANDO, FL 32828 City-St-Zip: ORLANDO, FL 32809

I hereby certify that the information supplied with this filing does not qualify for the 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: ENIO CARVALHO PD 03/15/2006