

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00820

FILED
Apr 09, 2007
Secretary of State

Entity Name: A.R.G. CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

221 WALTON HEATH DRIVE
ORLANDO, FL 32828 US

New Principal Place of Business:

4250 ALAFAYA TRAIL
SUITE 212-345
OVIEDO, FL 32765 US

Current Mailing Address:

221 WALTON HEATH DRIVE
#30
ORLANDO, FL 32828 US

New Mailing Address:

4250 ALAFAYA TRAIL
SUITE 212-345
OVIEDO, FL 32765 US

FEI Number: 59-2578287

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PALMER, BETH
221 WALTON HEATH DRIVE
ORLANDO, FL 32828 US

Name and Address of New Registered Agent:

RELIBALE PROPERTY MANAGERS
4250 ALAFAYA TRAIL
SUITE 212-345
OVIEDO, FL 32765 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: CURTIS BURNSIDE

04/09/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RONNICK, RICHARD
Address: 851 MILES AVE, UNIT # 14
City-St-Zip: WINTER PARK, FL 32789

Title: P () Delete
Name: COWARD, JAMES
Address: 851 MILES AVE, UNIT #4
City-St-Zip: WINTER PARK, FL 32789

Title: DP (X) Delete
Name: TACHER, JENNIFER
Address: 704 RAYMOND CIR
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: SD (X) Delete
Name: FISHER, LINDA
Address: 851 MILES AVE #15
City-St-Zip: WINTER PARK, FL 32789

Title: T (X) Delete
Name: JONES, MITCHELL
Address: 14474 JAMAICA DOGWOOD DR
City-St-Zip: ORLANDO, FL 32828

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: SPRAGUE, ERIKA
Address: 851 MILES AVE #23
City-St-Zip: WINTER PARK, FL 32789

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JAMES COWARD

P

04/09/2007

Electronic Signature of Signing Officer or Director

Date