

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 25, 2008 8:00 am
Secretary of State

02-25-2008 90056 036 ****61.25

DOCUMENT # N19497

1. Entity Name

PIEDMONT LAKES HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

PREMIER COMMUNITY MANAGERS
5151 ADANSON ST, SUITE 103
ORLANDO FL 32804
US

Mailing Address

PREMIER COMMUNITY MANAGERS
5151 ADANSON ST, SUITE 103
ORLANDO FL 32804
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

59-2852432

Applied For

Not Applicable

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

PREMIER COMMUNITY MANAGERS
5151 ADANSON ST
SUITE 103
ORLANDO FL 32804

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME SOTO, FERNANDO
STREET ADDRESS 1191 CRISPWOOD CT
CITY-ST-ZIP APOPKA FL 32703

TITLE DV ☒ Delete
NAME ELMQUIST, BRENDA
STREET ADDRESS 1178 CRISPWOOD CT
CITY-ST-ZIP APOPKA FL 32703

TITLE PD ☐ Delete
NAME PRATT, JANIS
STREET ADDRESS 2391 PIEDMONT LAKE BLVD
CITY-ST-ZIP APOPKA FL 32703

TITLE DT ☐ Delete
NAME HALPER, ALBERT
STREET ADDRESS 855 LAKE JACKSON CIR
CITY-ST-ZIP APOPKA FL 32703

TITLE D ☐ Delete
NAME JOBMAN, LINDA
STREET ADDRESS 896 LAKE JACKSON CIR
CITY-ST-ZIP APOPKA FL 32703

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☒ Addition
NAME Sharon Richardson
STREET ADDRESS 1060 Piedmont Lakes Blvd
CITY-ST-ZIP APOPKA, FL 32703

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 exemptions contained in Section 119, 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:

Janis M. Pratt President, JANIS M. PRATT