

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 757484

**FILED**  
**Feb 22, 2011**  
**Secretary of State**

**Entity Name:** ERROL HILLS VILLAGE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1411 VILLA HILL COURT  
APOPKA, FL 32712 US

**New Principal Place of Business:**

802 HILLSIDE DRIVE  
APOPKA, FL 32712 US

**Current Mailing Address:**

1411 VILLA HILL COURT  
APOPKA, FL 32712 US

**New Mailing Address:**

802 HILLSIDE DRIVE  
APOPKA, FL 32712 US

**FEI Number:** 59-2195905

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TROMBLEY, JOSEPH L  
1411 VILLA HILL COURT  
APOPKA, FL 32712 US

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

NEVILLE, DOLORES W  
802 HILLSIDE DRIVE  
APOPKA, FL 32712 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: DOLORES W NEVILLE

02/22/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: TREA  
Name: NEVILLE, DOLORES  
Address: 802 HILLSIDE DRIVE  
City-St-Zip: APOPKA, FL 32712

Title: PRES  
Name: AYERS, JOHN D  
Address: 1716 LAKE MARION DRIVE  
City-St-Zip: APOPKA, FL 32712

Title: VP  
Name: RIDDLE, KENNETH F  
Address: 1417 LAKE MARION DRIVE  
City-St-Zip: APOPKA, FL 32712

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: DOLORES W NEVILLE

TREA

02/22/2011

Electronic Signature of Signing Officer or Director

Date