

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50065

FILED  
Apr 09, 2012  
Secretary of State

**Entity Name:** ANDOVER LAKES, PHASE 2 HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

4700 MILLENIA BLVD  
SUITE 515  
ORLANDO, FL 32839

**New Principal Place of Business:**

**Current Mailing Address:**

4700 MILLENIA BLVD.  
SUITE 515  
ORLANDO, FL 32839

**New Mailing Address:**

4700 MILLENIA BLVD  
SUITE 515  
ORLANDO, FL 32839

FEI Number: 59-3159818

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

COMMUNITY MANAGEMENT PROFESSIONALS, INC.  
4700 MILLENIA BLVD  
SUITE 515  
ORLANDO, FL 32839 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: FRANKENFELD, MARK  
Address: 4700 MILLENIA BLVD. STE. 515  
City-St-Zip: ORLANDO, FL 32839

Title: VP  
Name: HUTTON, ANTHONY J  
Address: 4700 MILLENIA BLVD. STE. 515  
City-St-Zip: ORLANDO, FL 32839

Title: D  
Name: BROCK, LARRY  
Address: 4700 MILLENIA BLVD. STE. 515  
City-St-Zip: ORLANDO, FL 32839

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: MARK FRANKENFELD

P

04/09/2012

Electronic Signature of Signing Officer or Director

Date