

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002447

Entity Name: AVALON HOMEOWNERS ASSOCIATION OF BREVARD COUNTY, INC.

Current Principal Place of Business:

AVALON DRIVE
ROCKLEDGE, FL 32955

Current Mailing Address:

P.O. BOX 560912
ROCKLEDGE, FL 32956-0912 US

FEI Number: 20-1894147

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KLEMM, RUSSELL E
1065 MAITLAND CENTER COMMONS BLVD.
MAITLAND, FL 32751 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name SHUFORD, JOHN M
Address 1310 AVALON DRIVE
City-State-Zip: ROCKLEDGE FL 32955

Title TREASURER
Name ABELN, MARSHA L
Address 1323 AVALON DR
City-State-Zip: ROCKLEDGE FL 32955

Title DIRECTOR
Name CAPRIOLI, GEORGE
Address 1300 AVALON DR
City-State-Zip: ROCKLEDGE FL 32955

Title PRESIDENT
Name MAIRS, TEALINA P
Address 1312 AVALON DR
City-State-Zip: ROCKLEDGE FL 32955

Title VP
Name CAMPBELL, JAMES
Address 1305 AVALON DR
City-State-Zip: ROCKLEDGE FL 32955

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: TEALINA P MAIRS

PRESIDENT

04/26/2014

Electronic Signature of Signing Officer/Director Detail

Date