2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#723662

FILED Mar 12, 2009 Secretary of State

Entity Name: ANDALUCIA APARTMENTS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

860 NORTH S.R. 434 535 N. INTERLACHEN AVE #207 STE 1009 WINTER PARK, FL 32789

ALTAMONTE SPRINGS, FL 32714 US

New Mailing Address: Current Mailing Address:

860 NORTH S.R. 434 STE 1009

ALTAMONTE SPRINGS, FL 32714 US

FEI Number: 59-1491722 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CAMPBELL, MARILYN CENTRAL PROPERTY MANAGEMENT 860 NORTH S.R. 434 SUITE 1009 ALTAMONTE SPRINGS, FL 32714 US

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete MCCLENDON, GRADY MCCLENDON, GRADY D Name: Name: 535 N INTERJACHEN AVE #106 Address: 535 N INTERJACHEN AVE #106 Address: City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: WINTER PARK, FL 32789

Title: VD () Delete Title: (X) Change () Addition

HALL, JANE Name: HALL, JANE P Name:

Address: 535 NORTH INTERLACHEN AVENUE SUITE 207 Address: 535 N INTERLACHEN AVE # 207 City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: WINTER PARK, FL 32789

Title: () Delete Title: (X) Change () Addition DRISCOLL, PAM DRISCOLL, PAM S Name: Name:

535 N INTERLACHEND AVE #201 535 N INTERLACHEND AVE #201 Address: Address:

City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: WINTER PARK, FL 32789

Title: () Delete Title: (X) Change () Addition SOULE, ROBERT Name: Name: ERIKSSON, LINDA VP 535 N INTERLACHEN AVE #202 535 N INTERLACHEN AVE #303 Address: Address:

WINTER PARK, FL 32789 City-St-Zip: WINTER PARK, FL 32789 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

HALL, JANE PRATHER, DAVID T Name: Name: 535 INTERLACHEN AVE #207 319 VITORIA AVE Address: Address: City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: WINTER PARK, FL 32789

Title: () Delete Title: () Change (X) Addition RUSSELL, MIRIAM A MGR Name: Name: Address: Address: 860 NORTH S.R. 434, SUITE 1009 ALTAMONTE SPRINGS, FL 32714 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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

SIGNATURE: MIRIAM A. RUSSELL MGR 03/12/2009

Electronic Signature of Signing Officer or Director

above, or on an attachment with an address, with all other like empowered.

Date