2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729441

FILED Mar 18, 2011 Secretary of State

Entity Name: RAMBLEWOOD CONDOMINIUM ASSOCIATION OF ALTAMONTE SPRINGS, INC.

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

899 JOHNATHAN WAY 206 S ELM AVENUE

ALTAMONTE SPRINGS, FL 32701 US SANFORD, FL 32771 US

Current Mailing Address: New Mailing Address:

1122 AYRSHIRE ST 206 S ELM AVENUE

ORLANDO, FL 32803 US SANFORD, FL 32771 US

FEI Number: 59-1740804 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:

CAREY, JUDI A LCAM
ALL ABOUT MANAGEMENT, INC.
206 SOUTH ELM AVENUE
ORLANDO, FL 32803 US
SANFORD, FL 32771 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: ANGELIA L. GORDON 03/18/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PREA

Name: ALBERT, PAT Address: P.O. BOX 1569

City-St-Zip: SANFORD, FL 32772 US

Title: VP

Name: KARTAK, ARLENE Address: P.O. BOX 1569

City-St-Zip: SANFORD, FL 32772 US

Title: TREA

Name: ELLIS, ALFREDA Address: P.O. BOX 1569

City-St-Zip: SANFORD, FL 32772 US

Title: SEC

Name: GORMAN, LAURA
Address: P.O. BOX 1569
City St 7ip: SANEORD EL 32773 U

City-St-Zip: SANFORD, FL 32772 US

Title: BOD

Name: PORTMAN, GRACE Address: P.O. BOX 1569

City-St-Zip: SANFORD, FL 32772 US

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: ANGELIA L. GORDON RA 03/18/2011