
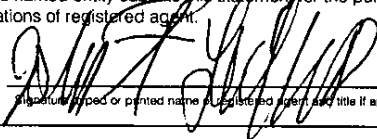
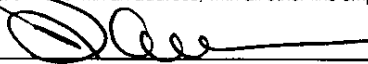


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 28, 2008 8:00 am**  
**Secretary of State**

04-28-2008 90349 001 \*\*\*\*61.25

<b>DOCUMENT # 746214</b> 1. Entity Name <b>ALTAMONTE HEIGHTS CONDOMINIUM ASSOCIATION, INC.</b>																																																																																																											
Principal Place of Business <b>190 NORTH WESTMONTE DRIVE #100 ALTAMONTE SPRINGS, FL 32714 US</b>		Mailing Address <b>190 NORTH WESTMONTE DRIVE #100 ALTAMONTE SPRINGS, FL 32714 US</b>																																																																																																									
2. Principal Place of Business - No P.O. Box # <b>300 Cherokee Ct</b> Suite, Apt. #, etc.		3. Mailing Address <b>300 Cherokee Ct</b> Suite, Apt. #, etc.																																																																																																									
City & State <b>Altamonte Springs FL</b>		City & State <b>Altamonte Springs FL</b>																																																																																																									
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Country <b>USA</b>		Country <b>USA</b>																																																																																																									
6. Name and Address of Current Registered Agent  <b>FLETCHER, NINETTE 991 WEKIVA SPRINGS RD LONGWOOD, FL 32779</b>		7. Name and Address of New Registered Agent Name <b>John Lenihan</b> Street Address (P.O. Box Number is Not Acceptable) <b>649 Northlake Blvd</b> City <b>Altamonte Springs</b> FL Zip Code <b>32701</b>																																																																																																									
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  DATE <b>4-25-08</b> <small>(NOTE: Registered Agent signature required when reinstating)</small>																																																																																																											
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees																																																																																																									
<b>Make check payable to Florida Department of State</b>																																																																																																											
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: left;">10. OFFICERS AND DIRECTORS</th> <th colspan="2" style="text-align: left;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</th> </tr> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">NAME</td> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">NAME</td> </tr> <tr> <td></td> <td><b>PD LIDDELL, NORMAN</b></td> <td></td> <td><b>President Dawn Warren</b></td> </tr> <tr> <td></td> <td><b>310A CHEROKEE CT</b></td> <td></td> <td><b>5634 EDGEWATER DR.</b></td> </tr> <tr> <td></td> <td><b>ALTAMONTE SPRINGS, FL 32701</b></td> <td></td> <td><b>ORLANDO, FL 32810</b></td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/> Delete</td> <td></td> <td><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td><b>B.D. BARETTA, DEBBIE</b></td> <td></td> <td><b>Treasurer Dennis Warren</b></td> </tr> <tr> <td></td> <td><b>312 F CHEROKEE CT</b></td> <td></td> <td><b>5634 EDGEWATER DR.</b></td> </tr> <tr> <td></td> <td><b>ALTAMONTE SPRINGS, FL 32701</b></td> <td></td> <td><b>ORLANDO, FL 32810</b></td> </tr> <tr> <td></td> <td><input type="checkbox"/> Delete</td> <td></td> <td><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td><b>T SIGMON, REGINALD</b></td> <td></td> <td><b>Sec. Kathleen Saylor</b></td> </tr> <tr> <td></td> <td><b>314 E CHEROKEE CT</b></td> <td></td> <td><b>111 Laurel Oaks Dr</b></td> </tr> <tr> <td></td> <td><b>ALTAMONTE SPRINGS, FL 32701</b></td> <td></td> <td><b>Longwood, FL 32752</b></td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/> Delete</td> <td></td> <td><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td><b>D ROCKE, DOUGLAS</b></td> <td></td> <td><b>V.P. John Lenihan</b></td> </tr> <tr> <td></td> <td><b>509 SEAN CT.</b></td> <td></td> <td><b>649 Northlake Blvd</b></td> </tr> <tr> <td></td> <td><b>APOPKA, FL 32703</b></td> <td></td> <td><b>Altamonte Springs, FL 32701</b></td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/> Delete</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td><b>D LOPEZ, CHRISTOPHER</b></td> <td></td> <td></td> </tr> <tr> <td></td> <td><b>310 E CHEROKEE CT</b></td> <td></td> <td></td> </tr> <tr> <td></td> <td><b>ALTAMONTE SPRINGS, FL 32701</b></td> <td></td> <td></td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/> Delete</td> <td></td> <td></td> </tr> <tr> <td></td> <td><b>V LOPEZ, CHRISTOPHER</b></td> <td></td> <td></td> </tr> <tr> <td></td> <td><b>310 E CHEROKEE CT</b></td> <td></td> <td></td> </tr> <tr> <td></td> <td><b>ALTAMONTE SPRINGS, FL 32701</b></td> <td></td> <td></td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/> Delete</td> <td></td> <td></td> </tr> </table>				10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		TITLE	NAME	TITLE	NAME		<b>PD LIDDELL, NORMAN</b>		<b>President Dawn Warren</b>		<b>310A CHEROKEE CT</b>		<b>5634 EDGEWATER DR.</b>		<b>ALTAMONTE SPRINGS, FL 32701</b>		<b>ORLANDO, FL 32810</b>		<input checked="" type="checkbox"/> Delete		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		<b>B.D. BARETTA, DEBBIE</b>		<b>Treasurer Dennis Warren</b>		<b>312 F CHEROKEE CT</b>		<b>5634 EDGEWATER DR.</b>		<b>ALTAMONTE SPRINGS, FL 32701</b>		<b>ORLANDO, FL 32810</b>		<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		<b>T SIGMON, REGINALD</b>		<b>Sec. Kathleen Saylor</b>		<b>314 E CHEROKEE CT</b>		<b>111 Laurel Oaks Dr</b>		<b>ALTAMONTE SPRINGS, FL 32701</b>		<b>Longwood, FL 32752</b>		<input checked="" type="checkbox"/> Delete		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		<b>D ROCKE, DOUGLAS</b>		<b>V.P. John Lenihan</b>		<b>509 SEAN CT.</b>		<b>649 Northlake Blvd</b>		<b>APOPKA, FL 32703</b>		<b>Altamonte Springs, FL 32701</b>		<input checked="" type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		<b>D LOPEZ, CHRISTOPHER</b>				<b>310 E CHEROKEE CT</b>				<b>ALTAMONTE SPRINGS, FL 32701</b>				<input checked="" type="checkbox"/> Delete				<b>V LOPEZ, CHRISTOPHER</b>				<b>310 E CHEROKEE CT</b>				<b>ALTAMONTE SPRINGS, FL 32701</b>				<input checked="" type="checkbox"/> Delete		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																																																																																											
<b>SIGNATURE:</b> 		Date <b>4-25-08</b> Daytime Phone # <b>407-831-6941</b>																																																																																																									
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