

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746230

FILED
Apr 14, 2009
Secretary of State

Entity Name: AVALON PLACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4543 SE 6TH PL
1F
CAPE CORAL, FL 33904

New Principal Place of Business:

Current Mailing Address:

4543 SE 6TH PL
1F
CAPE CORAL, FL 33904

New Mailing Address:

FEI Number: 59-2174652

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COTTRELL, JAMES L
1714 CAPE CORAL PKWY
CAPE CORAL, FL 33904 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: STD () Delete
Name: MARTINEZ, JUAQUIN
Address: 4543 SE 6TH PLACE, 1-F
City-St-Zip: CAPE CORAL, FL 33904

Title: PD () Delete
Name: JANUCCI, TOM
Address: 4539 SE 6TH PLACE 2-B
City-St-Zip: CAPE CORAL, FL 33904

Title: VD () Delete
Name: CORRAD, FRANK
Address: 4543 SE 6TH PL 2-D
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: IANNUCCI, TOM
Address: 4539 SE 6TH PLACE 2-B
City-St-Zip: CAPE CORAL, FL 33904

Title: VD (X) Change () Addition
Name: ROGERS, EDWARD
Address: 4543 SE 6TH PL 2-F
City-St-Zip: CAPE CORAL, FL 33904

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

SIGNATURE: JUAQUIN MARTINEZ

STD

04/14/2009

Electronic Signature of Signing Officer or Director

Date