

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 748020

**FILED**  
**Apr 10, 2012**  
**Secretary of State**

**Entity Name:** SIXTY VINING COURT HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

SIXTY VINING COURT  
ORMOND BCH, FL 32176 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 1431  
ORMOND BCH, FL 32175 US

**New Mailing Address:**

**FEI Number:** 59-2081141

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RIEDEL, ROSALIE  
6442 ENGRAM ROAD  
NEW SMYRNA BEACH, FL 32169 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: VPD  
Name: VASILIADES, PETER  
Address: 60 VINING CT #6  
City-St-Zip: ORMOND BEACH, FL 32176

Title: PD  
Name: TIMAN, GRETTEL  
Address: 60 VINING CT #13  
City-St-Zip: ORMOND BEACH, FL 32176

Title: STD  
Name: RIEDEL, ROSALIE  
Address: 6442 ENGRAM ROAD  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

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: ROSALIE RIEDEL

STD

04/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date