

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753290

FILED
Jan 28, 2008
Secretary of State

Entity Name: ALACHUA HIGHLANDS, UNIT NO. 1, OWNERSHIP ASSOCIATION, INC.

Current Principal Place of Business:

ONE SOUTHEAST FIRST STREET
P. O. BOX 312
ALACHUA, FL 32615

New Principal Place of Business:

Current Mailing Address:

ONE SOUTHEAST FIRST STREET
P. O. BOX 312
ALACHUA, FL 32616

New Mailing Address:

FEI Number: 59-2450261

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIDERS, CLAUDIA C
11318 NW 115TH TERRACE
ALACHUA, FL 32615 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: PRES () Delete
Name: BLUMBERG, GLENN
Address: 11421 NW 120 TERR
City-St-Zip: ALACHUA, FL 32615

Title: VP () Delete
Name: SIDERS, RONALD
Address: 11318 NW 115 TERR
City-St-Zip: ALACHUA, FL 32615

Title: SEC () Delete
Name: BLUMBERG, MARA
Address: 11421 NW 120 TERR
City-St-Zip: ALACHUA, FL 32615

Title: TREA () Delete
Name: SIDERS, CLAUDIA
Address: 11318 NW 115 TERRACE
City-St-Zip: ALACHUA, FL 32615

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: () Change () Addition
Name:
Address:
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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARA E. BLUMBERG

SEC

01/28/2008

Electronic Signature of Signing Officer or Director

Date