

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 756227

**FILED**  
**Jun 16, 2010**  
**Secretary of State**

**Entity Name:** AVALON CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

735 SOUTH A1A  
DEERFIELD BEACH, FL 33441

**New Principal Place of Business:**

**Current Mailing Address:**

735 SOUTH A1A  
DEERFIELD BEACH, FL 33441

**New Mailing Address:**

**FEI Number:** 59-2145659

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MINETTI, BARBARA  
1125 SW 20TH PLACE  
FORT LAUDERDALE, FL 333245068 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: TD  
Name: MINETTI, BARBARA A  
Address: 9125C SW 20TH PLACE  
City-St-Zip: FT. LAUDERDALE, FL 333245068

Title: D  
Name: WINNER, HENRY  
Address: 9582 LANCASTER PLACE  
City-St-Zip: BOCA RATON, FL 334342741

Title: D  
Name: CHESLAK, JOHN  
Address: 8741 NW 17TH PLACE  
City-St-Zip: PLANTATION, FL 33322

Title: PD  
Name: LENCZICKI, ISAAK  
Address: 15443 FLORAL CLUB ROAD  
City-St-Zip: DELRAY BEACH, FL 33484

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: BARBARA MINETTI

TD

06/16/2010

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

\_\_\_\_\_  
Date