

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000067

FILED
Mar 02, 2009
Secretary of State

Entity Name: VALENCIA AT ABACOA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1930 COMMERCE LANE STE 1
JUPITER, FL 33458

New Principal Place of Business:

Current Mailing Address:

1930 COMMERCE LANE STE 1
JUPITER, FL 33458

New Mailing Address:

FEI Number: 65-1081918

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INGLIS, STEVE
C/O BRISTOL MANAGEMENT
1930 COMMERCE LANE STE 1
JUPITER, FL 33458 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: VP () Delete
Name: SUAREZ, RAY
Address: 162 SANTIAGO DR.
City-St-Zip: JUPITER, FL 33458

Title: T () Delete
Name: TURNBUL, W. SCOTT
Address: 106 SANTIAGO DRIVE
City-St-Zip: JUPITER, FL 33458

Title: P () Delete
Name: KUKLA, MICHELE
Address: 119 VALENCIA BOULEVARD
City-St-Zip: JUPITER, FL 33458

Title: S () Delete
Name: LEDER, DOUGLAS
Address: 106 SANTIAGO DRIVE
City-St-Zip: JUPITER, FL 33458

Title: D () Delete
Name: PICCIANO, BILL
Address: 104 SANTIAGO DR
City-St-Zip: JUPITER, FL 33458

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: SUAREZ, RAY
Address: 162 SANTIAGO DR.
City-St-Zip: JUPITER, FL 33458

Title: D (X) Change () Addition
Name: TRACI, FICHTER
Address: 117 VALENCIA BLVD
City-St-Zip: JUPITER, FL 33458

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

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

Title: VP (X) Change () Addition
Name: PICCIANO, BILL
Address: 104 SANTIAGO DR
City-St-Zip: JUPITER, FL 33458

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: VERN HEATHERINGTON

LCAM

03/02/2009

Electronic Signature of Signing Officer or Director

Date