

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001861

FILED
Feb 02, 2009
Secretary of State

Entity Name: ANDOVER CAY HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

%ASSOCIATION MANAGEMENT GROUP OF CEN. FL
101 PARK PLACE BLVD., STE. 2
KISSIMMEE, FL 34741

New Principal Place of Business:

Current Mailing Address:

%ASSOCIATION MANAGEMENT GROUP OF CEN. FL
101 PARK PLACE BLVD., STE. 2
KISSIMMEE, FL 34741

New Mailing Address:

FEI Number: 59-3672212

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASSOCIATION MANAGEMENT GROUP OF CENTRAL FL
ORIDA, INC.
101 PARK PLACE BLVD., STE. 2
KISSIMMEE, FL 34741 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: S () Delete
Name: SOLLA, JESUS
Address: 4411 ANDOVER CAY BLVD.
City-St-Zip: ORLANDO, FL 32825

Title: D () Delete
Name: PIPPIN, MELODY
Address: 3225 KINGSTOWN CT
City-St-Zip: ORLANDO, FL 32825

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SOLLA, JESUS
Address: 4411 ANDOVER CAY BLVD.
City-St-Zip: ORLANDO, FL 32825

Title: P (X) Change () Addition
Name: PIPPIN, MELODY
Address: 3225 KINGSTOWN CT
City-St-Zip: ORLANDO, FL 32825

Title: VP () Change (X) Addition
Name: MARCO, DIBENEDATTO
Address: 3231 KINGTOWN CT.
City-St-Zip: ORLANDO, FL 32825

Title: T/S () Change (X) Addition
Name: DONGHUI, WU
Address: 13042 HEMING WAY
City-St-Zip: ORLANDO, FL 32825

Title: D () Change (X) Addition
Name: RICHARD, FRIX
Address: 12930 GRAND BANK LANE
City-St-Zip: KISSIMMEE, FL 32825

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: MELODY PIPPIN

P

02/02/2009

Electronic Signature of Signing Officer or Director

Date