

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003121

FILED
Apr 28, 2008
Secretary of State

Entity Name: LIBERTY VILLAGE PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

231 E. RUBY AVE. SUITE A
KISSIMMEE, FL 34741 US

New Principal Place of Business:

231 E. RUBY AVE
SUITE A
KISSIMMEE, FL 34741 US

Current Mailing Address:

P.O. BOX 452847
KISSIMMEE, FL 347452847 US

New Mailing Address:

FEI Number: 59-3733926

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASSOCIATION SOLUTIONS OF CENTRAL FLORIDA
231 E. RUBY AVE. SUITE A
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

ASSOCIATION SOLUTIONS OF CENTRAL FLORIDA
231 RUBY AVE
SUITE A
KISSIMMEE, FL 34741 US

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:

04/28/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GRASSANO, SAL
Address: 4490 PHILADELPHIA CIRCLE
City-St-Zip: KISSIMMEE, FL 34746 US

Title: VSD () Delete
Name: FLORES, JACK
Address: 4534 PHILADELPHIA CIRCLE
City-St-Zip: KISSIMMEE, FL 34746 US

Title: TD () Delete
Name: HARRIS, IAN
Address: 4492 PHILADELPHIA CIRCLE
City-St-Zip: KISSIMMEE, FL 34746 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change () Addition
Name: FLORES, JACK
Address: 4534 PHILADELPHIA CIRCLE
City-St-Zip: KISSIMMEE, FL 34746 US

Title: STD (X) Change () Addition
Name: HARRIS, IAN
Address: 4492 PHILADELPHIA CIRCLE
City-St-Zip: KISSIMMEE, FL 34746 US

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: SAL GRASSANO

P

04/28/2008

Electronic Signature of Signing Officer or Director

Date