

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008 8:00 am
Secretary of State

04-30-2008 90192 006 ****66.25
05-21-08 01013 024 ****3.75

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1. Entity Name
LOMA VISTA PROPERTY OWNERS' ASSOCIATION, INC.



Principal Place of Business
5405 DIPLOMAT CIRCLE
100
ORLANDO, FL 32810

Mailing Address
5405 DIPLOMAT CIRCLE
100
ORLANDO, FL 32810

60033871



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04282008 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
56-2380728

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CLAYTON, KENNETH M
% CLAYTON & MCCULLON
1065 MAITLAND CENTER COMMONS BLVD
MAITLAND, FL 32751

7. Name and Address of New Registered Agent

Name
CLAYTON, KENNETH M
Street Address (P.O. Box Number is Not Acceptable)
1065 MAITLAND CENTER COMMONS BLVD
City
MAITLAND FL Zip Code
32751

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
CLAYTON, BRANTLY W
5405 DIPLOMA CIR STE 100
ORLANDO, FL 32810 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
CLAYTON, W. MALCOLM
5405 DIPLOMA CIR STE 100
ORLANDO, FL 32810 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
DODGE, LINDA S
5405 DIPLOMA CIR STE 100
ORLANDO, FL 32810 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
CLAYTON BRANTLY W
5405 DIPLOMAT CIR STE 100
ORLANDO, FL 32810 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
CLAYTON, W. MALCOLM
5405 DIPLOMAT CIR STE 100
ORLANDO, FL 32810 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
DODGE, LINDA S.
5405 DIPLOMAT CIR STE 100
ORLANDO, FL 32810 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

W. Malcolm Clayton,
Director

Date

Daytime Phone #

4/29/08 407-644-6200