

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006597

FILED
Mar 13, 2006
Secretary of State

Entity Name: ANDOVER POINT HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 01-0581258

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT INC
2180 WEST SR 434 SUITE 434
LONGWOOD, FL 32779 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: PD () Delete
Name: PHILLIPS, KRISTIN
Address: 1014 ANDEROVER POINT CIR
City-St-Zip: ORLANDO, FL 32825

Title: SD () Delete
Name: SMITH, KAY
Address: 10349 ANDOVER POINT CIR
City-St-Zip: ORLANDO, FL 32825

Title: TD () Delete
Name: SMITH, KAY
Address: 10349 ANDOVER POINT CIR
City-St-Zip: ORLANDO, FL 32825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SERGE, WANDA
Address: 10372 ANDOVER POINT CIR
City-St-Zip: ORLANDO, FL 32825

Title: STD (X) Change () Addition
Name: SMITH, KAY
Address: 10349 ANDOVER POINT CIR
City-St-Zip: ORLANDO, FL 32825

Title: VPD (X) Change () Addition
Name: HERNANDEZ, JOSE
Address: 10268 ANDOVER POINT CIR
City-St-Zip: ORLANDO, FL 32825

I hereby certify that the information supplied with this filing does not qualify for the 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: WANDA SERGE

PD

03/13/2006

Electronic Signature of Signing Officer or Director

Date