2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N02000000906

T FILED

Aug 31, 2012
Secretary of State

Entity Name: AVENDALE OWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

9887 FOURTH STREET NORTH 5901 US HWY. 19

SUITE 301 7Q

ST. PETERSBURG, FL 33702 US NEW PORT RICHEY, FL 34652 US

Current Mailing Address: New Mailing Address:

9887 FOURTH STREET NORTH 5901 US HWY. 19

SUITE 301 70

ST. PETERSBURG, FL 33702 US NEW PORT RICHEY, FL 34652 US

FEI Number: 04-3619183 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

QUALIFIED PROPERTY MANAGEMENT, INC.

5901 US HWY. 19

NEW PORT RICHEY, FL 34652 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: MARY A. WHITE 08/31/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Γitle: PRES

Name: HARPER, JULIE

Address: 5901 US HWY. 19, STE. 7Q City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: VP

Name: JENSEN, WAYNE

Address: 5901 US HWY 19, STE. 7Q City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: TREA

Name: TSIOULAS, ANTHONY Address: 5901 US HWY. 19, STE. 7Q

City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title:

Name: KLAFEHN, DEBORAH Address: 5901 US HWY. 19, STE. 7Q

City-St-Zip: NEW PORT RICHEY, FL 34652 US

I hereby 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 all other like empowered.

SIGNATURE: JULIE HARPER PRES 08/31/2012