2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2010
Secretary of State

DOCUMENT# N02000004398

Entity Name: AVALON LAKES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

390 W S. R. 434
SUITE 203
LONGWOOD, FL 32750 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 197043
WINTER SPRINGS, FL 32719 US

New Mailing Address:

FEI Number: 01-0726879 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PALMERSTON, LLC
390 W S. R. 434
SUITE 203
LONGWOOD, FL 32750 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
Name: SANTOMAURO, SCOTT
Address: 13857 MIRROR LAKE DR
City-St-Zip: ORLANDO, FL 32828 US

Title: VPD
Name: TRAN, JAYMES
Address: 13921 MORNING FROST DRIVE
City-St-Zip: ORLANDO, FL 32828 US

Title: T
Name: HAIGHT, LIZ
Address: 13825 DOVE WING COURT
City-St-Zip: ORLANDO, FL 32828 US

Title: D
Name: OLMSTEAD, CHRISTOPHER
Address: 13431 HIDDEN FOREST CIRCLE
City-St-Zip: ORLANDO, FL 32828 US

Title: S
Name: ROBERTS, CHARITY
Address: 14163 TURNING LEAF DRIVE
City-St-Zip: ORLANDO, FL 32828 US

Title: D
Name: FISHER, HOBART
Address: 13824 DOVE WING COURT
City-St-Zip: ORLANDO, FL 32828 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: SCOTT SANTOMAURO P 03/30/2010

Electronic Signature of Signing Officer or Director — Date