

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001623

FILED
Feb 29, 2012
Secretary of State

Entity Name: CHRISTIANA GARDENS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

825 HAVEN OAK COURT
APOPKA, FL 32703 US

New Principal Place of Business:

Current Mailing Address:

860 NORTH S.R. 434
SUITE 1009
ALTAMONTE SPRINGS, FL 32714 US

New Mailing Address:

FEI Number: 26-0061678

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPBELL, MARILYN
C/O CENTRAL PROPERTY MGMT, INC
860 NORTH S.R. 434, SUITE 1009
ALTAMONTE SPRINGS, FL 32714 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: VP/S
Name: MARTIN, THERESA
Address: 346 GARDEN OAK CT
City-St-Zip: APOPKA, FL 32703 US

Title: P
Name: HUGHES, SYLVIA
Address: 825 HAVEN OAK CT
City-St-Zip: APOPKA, FL 32703 US

Title: T
Name: MICHAUD, BARRY
Address: 338 GARDEN OAK CT
City-St-Zip: APOPKA, FL 32703

Title: D
Name: LABRADOR, MISAEL
Address: 2760 GRASS LOOP
City-St-Zip: APOPKA, FL 32712 US

Title: MGR
Name: HERNQUIST, EDITH A
Address: 860 NORTH S.R. 434, SUITE 1009
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 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: EDITH A. HERNQUIST

MGR

02/29/2012

Electronic Signature of Signing Officer or Director

Date