## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # N03000005074**

1. Entity Name

THE ALEXANDRIA PLACE HOMEOWNERS ASSOCIATION, INC.



FILED Apr 03, 2008 08:00 Al Secretary of State

Principal Place of Business

2414 EMERALD ROSE WAY APOPKA, FL 32712

Mailing Address

PO BOX 2023 APOPKA, FL 32704



03042008 No Chg-NP

CR2E037 (4/06)

4. FEI Number		Applied For
20-0720444	i	Not Applicable
5. Certificate of Status Desired	\$8.75	Additional quired

## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

NEDLEY, SHERI 2414 EMERALD ROSE WAY APOPKA, FL 32712

**SIGNATURE:** 

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of changing its registions of registered agent.	stered office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept		
	New Mode		310412008		
SIGNATURE Sprague, typed or printed (ame of registered agent and title if applicable (NOTE: Registered Agent eignature required when reinstaining)  DATE					
	Filing Fee is \$61.25  Due by May 1, 2008  9. Election Campaign F Trust Fund Contributi		000000880298 04/15/08-80053-025 61.25		
10.	OFFICERS AND DIRECTORS	The second secon	The state of the s		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HAASE, RONALD 2321 POND COVE WAY APOPKA, FL 32712				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CORTESE, DOMINIC 342 ALEXANDRIA PLACE DR. APOPKA, FL 32712				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN.	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE . NAME STREET ADDRESS CITY-ST-ZIP		The state of the s			
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 antigodiess, with all other like empowered.					

SHERI NEDLEY