

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005074

FILED
Apr 20, 2009
Secretary of State

Entity Name: THE ALEXANDRIA PLACE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2414 EMERALD ROSE WAY
APOPKA, FL 32712

New Principal Place of Business:

Current Mailing Address:

PO BOX 2023
APOPKA, FL 32704

New Mailing Address:

FEI Number: 20-0720444

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEDLEY, SHERI
2414 EMERALD ROSE WAY
APOPKA, FL 32712 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: P () Delete
Name: HAASE, RONALD
Address: 2321 POND COVE WAY
City-St-Zip: APOPKA, FL 32712

Title: VP () Delete
Name: CORTESE, DOMINIC
Address: 342 ALEXANDRIA PLACE DR.
City-St-Zip: APOPKA, FL 32712

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD () Change (X) Addition
Name: NEDLEY, SHERI
Address: 2414 EMERALD ROSE WAY
City-St-Zip: APOPKA, FL 32712

I hereby certify that the information supplied with this filing does not qualify 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: RONALD HAASE

PD

04/20/2009

Electronic Signature of Signing Officer or Director

Date