## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)



FILED Apr 07, 2006 8:00 am

DOCUMENT # N0300009080  1. Entity Name  ALAFIA PRESERVE HOMEOWNERS ASSOCIATION, INC.				Secretary of State 04-07-2006 90044 036 ****61.25
4703 RAMBLING RIVER ROAD 479		Mailing Address 4703 RAMBLING RIVER BRANDON FL 33511	ROAD	
Principal Place of Business 3. N		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		1st MOORE CR2E037 (10/05)
City & Sta	te	City & State		4. FEI Number Applied For Not Applicable
Zip	. Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Agent
			Name	Voorhis, Barbara K Williams
WILLIAMS-VAN VOORHIS, BARBARA K 4703 RAMBLING RIVER ROAD BRANDON FL 33511				ddress (P.O. Box Nurgber is Not Acceptable) 3 Rambling Kiver Ka
[			CityBra	won FL 33511
the obliga	Signature, typed or printed name of registered agent  FILE NOW: FEE IS \$61.25  Due By May 1, 2006	9. Election Camp Trust Fund Co	Anagesterod Agent signalic paign Financing intribution.	registered agent, or both, in the State of Florida. I am familiar with, and accept   ## 3   06  DATE  \$5.00 May Be Added to Fees
10.	OFFICERS AND DIE		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
NAME STREET ADDRESS CITY-ST-ZIP	PD WILLIAMS-VAN VOORHIS, BARBA 4703 RAMBLING RIVER ROAD BRANDON FL 33511	□ Delete RAK	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD WILLIAMS-VAN VOORHIS, KEN C 4703 RAMBLING RIVER ROAD BRANDON FL 33511	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Von Koorfris, Kenneth R Wms 4703 Rambling River Rd  Brandon FL 33511
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delote	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change _ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
THTLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 an address, with all other like empowered.

SIGNATURE:

SIGNATURE:

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP