

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001362

FILED
May 15, 2007
Secretary of State

Entity Name: ROBINSWOOD COMMUNITY IMPROVEMENT ASSOCIATION, INC.

Current Principal Place of Business:

5916 JENNINGS RD
ORLANDO, FL 32808

New Principal Place of Business:

Current Mailing Address:

PO BOX 683015
ORLANDO, FL 32808

New Mailing Address:

FEI Number: 20-0716173 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DIEHL, ROSE
5521 LACONIA ROAD
ORLANDO, FL 32808 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: DIEHL, ROSE
Address: 5821 LACONIA
City-St-Zip: ORLANDO, FL 32808

Title: D () Delete
Name: JOHNSON, HARRY B
Address: 6048 BALBOA DRIVE
City-St-Zip: ORLANDO, FL 32808

Title: D () Delete
Name: TORRES, LUIS A
Address: 5908 AVERY STREET
City-St-Zip: ORLANDO, FL 32808

Title: D () Delete
Name: SHANKS, ROBERT
Address: 2082 ALLEGHENY COURT
City-St-Zip: ORLANDO, FL 32818

Title: D () Delete
Name: CLAYTON, MOLLY
Address: 5918 JENNING ROAD
City-St-Zip: ORLANDO, FL 32808

Title: D () Delete
Name: JONES, AMY
Address: E-210 CASTLEWOOD LANE
City-St-Zip: ORLANDO, FL 32808

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: D (X) Change () Addition
Name: CLAYTON, MOLLYE J
Address: 5918 JENNING ROAD
City-St-Zip: ORLANDO, FL 32808

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

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: MOLLYE J. CLAYTON

MS

05/15/2007

Electronic Signature of Signing Officer or Director

Date