

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006075

FILED
Jan 03, 2007
Secretary of State

Entity Name: AVALON COMMUNITY MULTI SERVICE INC.

Current Principal Place of Business:

6121 AVALON RD
WINTER GARDEN, FL 34787

New Principal Place of Business:

Current Mailing Address:

6121 AVALON RD
WINTER GARDEN, FL 34787

New Mailing Address:

FEI Number: 68-0600559 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIVERA, VICTOR A
8220 WINDSOR RIDGE RD.
ORLANDO, FL 32835 US

Name and Address of New Registered Agent:

RIVERA, VICTOR A
1439 BELFIORE WAY
WINDERMERE, FL 34786 US

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

01/03/2007

_____ Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RIVERA, VICTOR
Address: 8220 WINDSOR RIDGE RD
City-St-Zip: ORLANDO, FL 32820

Title: SEC () Delete
Name: CABRERA, MILAGROS
Address: 1411 SHERBOURNE ST
City-St-Zip: WINTER GARDEN, FL 34787

Title: TRES () Delete
Name: BELLO, LUIS G
Address: 12295 BOHANNON BLVD
City-St-Zip: ORLANDO, FL 32824

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RIVERA, VICTOR
Address: 1439 BELFIORE WAY
City-St-Zip: WINDERMERE, FL 34786

Title: VP (X) Change () Addition
Name: CARDONA, JOSE E
Address: 1314 CASTLEPORT RD.
City-St-Zip: WINTER GARDEN, FL 34787

Title: TRES (X) Change () Addition
Name: RODRIGUEZ, CARMEN V
Address: 1314 CASTLEPORT RD.
City-St-Zip: WINTER GARDEN, FL 34787

Title: SEC () Change (X) Addition
Name: LACEN, SARAH
Address: 575 LIVE OAK AVE. APT. 4304
City-St-Zip: HAINES CITY, FL 33844

I hereby certify that the information supplied with this filing does not qualify for the 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: VICTOR A. RIVERA

_____ Electronic Signature of Signing Officer or Director

PRES

01/03/2007

_____ Date