

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010433

FILED
Apr 24, 2007
Secretary of State

Entity Name: ANDALUCIA HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

9130 CORSEA DEL FONTANA WAY
NAPLES, FL 34009

New Principal Place of Business:

9130 CORSEA DEL FONTANA WAY
NAPLES, FL 34109

Current Mailing Address:

9130 CORSEA DEL FONTANA WAY
NAPLES, FL 34009

New Mailing Address:

9130 CORSEA DEL FONTANA WAY
NAPLES, FL 34109

FEI Number: 20-2400818

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

D JAMOOS, JOSEPH E
9130 CORSEA DEL FONTANA WAY
NAPLES, FL 34009 US

Name and Address of New Registered Agent:

D JAMOOS, JOSEPH E
9130 CORSEA DEL FONTANA WAY
NAPLES, FL 34109 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:

04/24/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: D'JAMOOS, JOSEPH
Address: 9130 CORSEA DEL FONTANA WAY
City-St-Zip: NAPLES, FL 34009

Title: DVT () Delete
Name: D'JAMOOS, ELIZABETH A
Address: 9130 CORSEA DEL FONTANA WAY
City-St-Zip: NAPLES, FL 34009

Title: DS () Delete
Name: D'JAMOOS, JENNIFER
Address: 9130 CORSEA DEL FONTANA WAY
City-St-Zip: NAPLES, FL 34009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: D'JAMOOS, JOSEPH
Address: 9130 CORSEA DEL FONTANA WAY
City-St-Zip: NAPLES, FL 34109

Title: DVT (X) Change () Addition
Name: D'JAMOOS, ELIZABETH A
Address: 9130 CORSEA DEL FONTANA WAY
City-St-Zip: NAPLES, FL 34109

Title: DS (X) Change () Addition
Name: D'JAMOOS, JENNIFER
Address: 9130 CORSEA DEL FONTANA WAY
City-St-Zip: NAPLES, FL 34109

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: ELIZABETH A. D'JAMOOS

DVT

04/24/2007

Electronic Signature of Signing Officer or Director

Date