

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010456

FILED
Apr 28, 2008
Secretary of State

Entity Name: AVONDALE ESTATES ASSOCIATION INC

Current Principal Place of Business:

3710 AVON RD
SPRINGFIELD, FL 32404

New Principal Place of Business:

Current Mailing Address:

1514 W 23RD ST
UNIT A
PANAMA CITY, FL 32405

New Mailing Address:

2023 THOMAS DRIVE
PANAMA CITY BEACH, FL 32408

FEI Number: 20-3603335

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKINNER, CAMERON
3511 PLEASANT HILL RD
LYNN HAVEN, FL 32444 US

Name and Address of New Registered Agent:

SKINNER, CAMERON
2023 THOMAS DRIVE
PANAMA CITY BEACH, FL 32408 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:

04/28/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SKINNER, CAMERON F
Address: 3511 PLEASANT HILL RD
City-St-Zip: LYNN HAVEN, FL 32444

Title: VP () Delete
Name: RUDOLPH, JOSEPH M
Address: 8409 N LAGOON DR
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: TR () Delete
Name: SHEFFER, WENDI L
Address: 1514 W 23RD ST UNIT A
City-St-Zip: PANAMA CITY, FL 32405

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TR (X) Change () Addition
Name: SHEFFER, WENDI L
Address: 2023 THOMAS DRIVE
City-St-Zip: PANAMA CITY, FL 32408

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: CAMERON SKINNER

P

04/28/2008

Electronic Signature of Signing Officer or Director

Date