

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012025

FILED
Apr 29, 2008
Secretary of State

Entity Name: AVIANA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8009 SOUTH ORANGE AVE.
ORLANDO, FL 32809

New Principal Place of Business:

5955 T.G. LEE BLVD.
SUITE 300
ORLANDO, FL 32822

Current Mailing Address:

5200 VINELAND ROAD
ORLANDO, FL 32811

New Mailing Address:

5955 T.G. LEE BLVD.
SUITE 300
ORLANDO, FL 32822

FEI Number: 20-4312845

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUPTA, SURESH
5200 VINELAND ROAD
SUITE 200
ORLANDO, FL 32811 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: DP () Delete
Name: CAVARETTA, CHARLES F
Address: 5200 VINELAND ROAD, SUITE 200
City-St-Zip: ORLANDO, FL 32811

Title: DVP () Delete
Name: GUPTA, VISHAAL
Address: 5200 VINELAND ROAD, SUITE 200
City-St-Zip: ORLANDO, FL 32811

Title: DS () Delete
Name: BHATIA, DAVESH
Address: 5200 VINELAND ROAD, SUITE 200
City-St-Zip: ORLANDO, FL 32811

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DS (X) Change () Addition
Name: CROCKER, TED J
Address: 5200 VINELAND ROAD, SUITE 200
City-St-Zip: ORLANDO, FL 32811

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: CHARLES CAVARETTA

DP

04/29/2008

Electronic Signature of Signing Officer or Director

Date