

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2008 8:00 am
Secretary of State

02-11-2008 90044 016 ****61.25

DOCUMENT # N05023

1. Entity Name
DANBURY MILL HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business
**4004 EDGEWATER DRIVE
ORLANDO, FL 32804-2837**

Mailing Address
**4004 EDGEWATER DRIVE
ORLANDO, FL 32804-2837**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01262008

Chg-NP

CR2E037 (12/06)

4. FEI Number
59-2543872

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ASSET REAL ESTATE INC
4004 EDGEWATER DRIVE
ORLANDO, FL 32804-2837**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

(Signature, typed or printed name of registered agent and title if applicable.)

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25 ...
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DV
PARKER, RAYMOND
1813 TORRINGTON CIRCLE
LONGWOOD, FL 32750 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
✓ Douglas, Roger
1782 Torrington Circle
Longwood FL 32750 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
ROME, RICHARD
1822 TORRINGTON CIRCLE
LONGWOOD, FL 32750 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T Rome, Richard
1822 Torrington Circle
Longwood FL 32750 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
MOY, GERI
1722 TORRINGTON CIR
LONGWOOD, FL 32750 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
- ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
FURTON, ROBERT
846 WEATHERLY CT
LONGWOOD, FL 32750 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D Lyday, Marilyn
974 Malden Court
Longwood FL 32750 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DT
SCHMID, MARSHA
815 HILARY CT
LONGWOOD, FL 32752 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P Schmid, Marsha
815 Hilary Ct
Longwood FL 32750 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Gerri Moy* **GERI MOY**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/8/2008 **407 299 9009**
Date Daytime Phone #