

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004521

FILED  
Mar 02, 2011  
Secretary of State

**Entity Name:** ARBOR GLADE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

6972 LAKE GLORIDA BLVD  
ORLANDO, FL 328093200 US

**New Principal Place of Business:**

12058 SAN JOSE BLVD.  
SUITE 904  
JACKSONVILLE, FL 32223 US

**Current Mailing Address:**

6972 LAKE GLORIDA BLVD  
ORLANDO, FL 328093200 US

**New Mailing Address:**

P.O. BOX 600033  
JACKSONVILLE, FL 32260 US

FEI Number: 20-5047259

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

PROPERTY MANAGEMENT PARTNERS OF ST. JOHNS  
12058 SAN JOSE BLVD.  
SUITE 904  
JACKSONVILLE, FL 32223 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: ELAINE T. BROOKS

03/02/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MOORER, STEPHANIE  
Address: P.O. BOX 600033  
City-St-Zip: JACKSONVILLE, FL 32260

Title: T  
Name: TRAVIS, JEFFREY  
Address: P.O. BOX 600033  
City-St-Zip: JACKSONVILLE, FL 32260

Title: S  
Name: RUKAB, CHRISTY  
Address: P.O. BOX 600033  
City-St-Zip: JACKSONVILLE, FL 32260

I hereby 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 all other like empowered.

SIGNATURE: STEPHANIE MOORER

P

03/02/2011

Electronic Signature of Signing Officer or Director

Date