## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000007839

FILED May 16, 2007 Secretary of State

Entity Name: APOPKA AIRPORT CONDO ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1321 APOPKA AIRPORT ROAD APOPKA, FL 32712

Current Mailing Address: New Mailing Address:

1321 APOPKA AIRPORT ROAD APOPKA, FL 32712

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

THOMPSON, JAMES P A RODANTE, DOUGLAS L
1320 NORTHRIDGE DRIVE 1303 EAST 5TH AVENUE
LONGWOOD, FL 32750 US MT. DORA,, FL 32757 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: DOUGLAS RODANTE 05/16/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P
 ( ) Delete
 Title:
 PRES
 (X) Change ( ) Addition

 Name:
 THOMPSON, JAMES P.A.
 Name:
 RODANTE, DOUGLAS L

Address: 1320 NORTHRIDGE DRIVE Address: 1303 EAST 5TH AVENUE City-St-Zip: LONGWOOD, FL 32750 City-St-Zip: MOUNT DORA, FL 32757

Title: VP (X) Delete Title: ( ) Change ( ) Addition

 Name:
 THOMPSON, JAMES P.A.
 Name:

 Address:
 1320 NORTHRIDGE DRIVE
 Address:

 City-St-Zip:
 LONGWOOD, FL 32750
 City-St-Zip:

Title: SECR (X) Delete Title: ( ) Change ( ) Addition

 Name:
 THOMPSON, JAMES P A
 Name:

 Address:
 1320 NORTHRIDGE DRIVE
 Address:

 City-St-Zip:
 LONGWOOD, FL 32750
 City-St-Zip:

Title: TREA (X) Delete Title: ( ) Change ( ) Addition

Name:THOMPSON, JAMES P AName:Address:1320 NORTHRIDGE DRIVEAddress:City-St-Zip:LONGWOOD, FL 32750City-St-Zip:

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: DOUGLAS RODANTE PRES 05/16/2007