

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # N06000012594

1. Entity Name

AMERICAN COMMUNITIES LOVING ACTIONS INC.



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

07 AUG 21 PM 2:36

Principal Place of Business

2780 N.W. 152 TERRACE  
OPALOCKA FL 33054

Mailing Address

2780 N.W. 152 TERRACE  
OPALOCKA FL 33054

08/01/07 90036'020 \$61.25



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

4. FEI Number

☒ Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

2nd MOORE

CR2E037 (4/07)

6. Name and Address of Current Registered Agent

ODOM, CYNTHIA  
2780 N.W. 152 TERRACE  
OPALOCKA FL 33054

7. Name and Address of New Registered Agent

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 resigning)

DATE

FILE NOW: FEE IS \$61.25  
Due By September 5, 2007.

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

TITLE D ☐ Delete  
NAME SUTTON, WALTER  
STREET ADDRESS 2780 N.W. 152 TERRACE  
CITY-ST-ZIP OPALOCKA FL 33054

TITLE D ☐ Delete  
NAME ODOM, CYNTHIA  
STREET ADDRESS 2780 N.W. 152 TERRACE  
CITY-ST-ZIP OPALOCKA FL 33054

TITLE D ☐ Delete  
NAME LEWIS, JOYCE  
STREET ADDRESS 2780 N.W. 152 TERRACE  
CITY-ST-ZIP OPALOCKA FL 33054

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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STREET ADDRESS  
CITY-ST-ZIP

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

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: *Walter Sutton* Walter Sutton

08/01/07

305-725-7262