

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012601

FILED
Jan 18, 2012
Secretary of State

Entity Name: ANDOVER HOMEOWNERS ASSOCIATION OF POLK COUNTY, INC.

Current Principal Place of Business:

1640 MERRIMACK COURT
DAVENPORT, FL 33837

New Principal Place of Business:

8390 CHAMPIONS GATE BLVD. #304
CHAMPIONS GATE, FL 33896

Current Mailing Address:

P O BOX 2401
DAVENPORT, FL 33836

New Mailing Address:

8390 CHAMPIONS GATE BLVD. #304
CHAMPIONS GATE, FL 33896

FEI Number: 20-8030509

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MCLEODCAMPBELL, OLGIA K
1640 MERRIMACK COURT
DAVENPORT, FL 33837 US

Name and Address of New Registered Agent:

AEGIS COMMUNIYT MGMT SOLUTIONS, INC.
8390 CHAMPIONS GATE BLVD. #304
CHAMPIONS GATE, FL 33896 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: DAVID BURMAN

01/18/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: D'AMICO, JAMES
Address: 8390 CHAMPIONS GATE BLVD. #304
City-St-Zip: CHAMPIONS GATE, FL 33836

Title: VP
Name: IRIZARRY, HEBER
Address: 8390 CHAMPIONS GATE BLVD #304
City-St-Zip: CHAMPIONS GATE, FL 33836

Title: S
Name: D'AMICO, EMILY
Address: 8390 CHAMPIONS GATE BLVD. #304
City-St-Zip: CHAMPIONS GATE, FL 33836

Title: T
Name: STOLTZ, DON
Address: 8390 CHAMPIONS GATE BLVD. #304
City-St-Zip: CHAMPIONS GATE, FL 33836

Title: D
Name: HERRING, MITZI
Address: 8390 CHAMPIONS GATE BLVD. #304
City-St-Zip: CHAMPIONS GATE, FL 33896

Title: D
Name: WILLIAMS, PETER
Address: 8390 CHAMPIONS GATE BLVD. #304
City-St-Zip: CHAMPIONS GATE, FL 33896

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: JAMES D'AMICO

PRES

01/18/2012

Electronic Signature of Signing Officer or Director

Date