

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001537

FILED  
Apr 24, 2009  
Secretary of State

**Entity Name:** THE INDUSTRIAL PARK AT AVONLEA OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

14 SE SAILFISH LANE  
STUART, FL 34996

**New Principal Place of Business:**

**Current Mailing Address:**

14 SE SAILFISH LANE  
STUART, FL 34996

**New Mailing Address:**

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

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

WAXLER, CAROL S  
14 SE SAILFISH LANE  
STUART, FL 34996    US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D                      ( ) Delete  
Name: PATTERSON, JOHN  
Address: 2104 NW 22ND AVE 9-109  
City-St-Zip: STUART, FL 34994

Title: D                      ( ) Delete  
Name: WACHA, FRANK A JR  
Address: 3860 NE CHERI DR  
City-St-Zip: JENSEN BEACH, FL 34957

Title: S                      ( ) Delete  
Name: PATERSON, PEGGY  
Address: 14 SE SAILFISH LANE  
City-St-Zip: STUART, FL 34996

Title: DP                      ( ) Delete  
Name: MARTEL, HANNAH  
Address: PO BOX 969  
City-St-Zip: JENSEN BEACH, FL 34957

Title: D                      ( ) Delete  
Name: WAXLER, CAROL S  
Address: 14 SE SAILFISH LANE  
City-St-Zip: STUART, FL 34996

Title: T                      ( ) Delete  
Name: PATERSON, PEGGY  
Address: 14 SE SAILFISH LANE  
City-St-Zip: STUART, FL 34996

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:                      ( ) Change ( ) Addition  
Name:  
Address:  
City-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: CAROL S. WAXLER

D

04/24/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date