2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001678

FILED Apr 05, 2009 Secretary of State

Entity Name: AUTUMN LANE TOWNHOMES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
	PHILLIPS BLVC) <u>.</u>		
JITE 140 RI ANDO) D, FL 32819			
	lailing Address	s:	New Mailing Addres	ss:
D-BOX 4	- RE & MANAGEI 150326 EE, FL 34745	MENT		
I Number	: 20-8470069	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and Address of Current Registered Agent:		Name and Address of New Registered Agent:		
'ARNKE	OUDIOTORIU			
	, CHRISTOPH I RIDA PARKWA EE, FL 34743			
SSIMME ne above the State	RIDA PARKWA EE, FL 34743 named entity se of Florida.	Y US	purpose of changing its registere	ed office or registered agent, or both,
SSIMME ne above the State	RIDA PARKWA EE, FL 34743 e named entity s e of Florida. RE:	Y US		ed office or registered agent, or both, Date
SSIMME ne above the State GNATUI	RIDA PARKWA EE, FL 34743 e named entity s e of Florida. RE:	Y US ubmits this statement for the part of the part of Registered Ag	ent	ed office or registered agent, or both, Date DES TO OFFICERS AND DIRECTOR
SSIMME ne above the State GNATUI	RIDA PARKWA EE, FL 34743 e named entity s e of Florida. RE: Electroni S AND DIRECT	Y US ubmits this statement for the plants this statement for the plants of Signature of Registered Agroup of Corona (Signature of Coro	ent	Date
SSIMME The above The State GNATUI FFICER The: The: The control of the state The control	RIDA PARKWA EE, FL 34743 e named entity s e of Florida. RE: Electroni S AND DIRECT P () SALAZAR, JORG 7009 DR. PHILL ORLANDO, FL 3	Y US ubmits this statement for the position of Registered Age c Signature of Registered Age d Signature of Registered Age c Signature of Registered Age	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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: JORGE SALAZAR P 04/05/2009