

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004101

FILED
Jun 17, 2009
Secretary of State

Entity Name: ARBOLEDA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3250 CLUB DR.
DESTIN, FL 32541

New Principal Place of Business:

Current Mailing Address:

3250 CLUB DR.
DESTIN, FL 32541

New Mailing Address:

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:

HART, W. CHRISTOPHER
34990 EMERALD COAST PARKWAY, STE. 301
DESTIN, FL 32541 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: DP () Delete
Name: SLONE, HAROLD G.
Address: 4229 STEVE REYNOLDS BLVD., STE. 210
City-St-Zip: NORCROSS, GA 30093

Title: DST () Delete
Name: GENTZEL, JENNIFER
Address: 4229 STEVE REYNOLDS BLVD., STE. 210
City-St-Zip: NORCROSS, GA 30093

Title: DV () Delete
Name: STROBLE, CHARLES P.
Address: 3250 CLUB DR.
City-St-Zip: DESTIN, FL 32541

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:

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: CHARLES P. STROBLE

Electronic Signature of Signing Officer or Director

PRES

06/17/2009

_____ Date