

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07671

FILED
Jan 28, 2010
Secretary of State

Entity Name: A.C. CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

498 PLAM SPRINGS DRIVE #235
ALTAMONTE SPRINGS, FL 32701 US

New Principal Place of Business:

498 PALM SPRINGS DRIVE #235
ALTAMONTE SPRINGS, FL 32701 US

Current Mailing Address:

%BOYLE MANAGEMENT
498 PLAM SPRINGS DRIVE #235
ALTAMONTE SPRINGS, FL 32701 US

New Mailing Address:

498 PALM SPRINGS DRIVE #235
ALTAMONTE SPRINGS, FL 32701 US

FEI Number: 59-2749928

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOYLE, JAMES
498 PLAM SPRINGS DRIVE #235
ALTAMONTE SPRINGS, FL 32701 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: PD
Name: SINGLETARY, VICKI
Address: 3703-8 S. LAKE ORLANDO PKWY
City-St-Zip: ORLANDO, FL 32828

Title: SD
Name: LYNCH, JANET
Address: 3705 S. LK ORLANDO PKWY, #12
City-St-Zip: ORLANDO, FL 32808

Title: D
Name: DOHERTY, SHERRIE
Address: 3713-4 S. LK. ORLANDO PKWY
City-St-Zip: ORLANDO, FL 32808

Title: D
Name: DECERBO, THOMAS
Address: 3715 S. LAKE ORLANDO PKWY., 11
City-St-Zip: ORLANDO, FL 32808

Title: D
Name: DIXION, GAYLE
Address: 3715 S LAKE ORLANDO PKWY
City-St-Zip: ORLANDO, FL 32808

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: VICKI SINGLETARY

PRES

01/28/2010

Electronic Signature of Signing Officer or Director

Date