

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13248

FILED
Apr 30, 2009
Secretary of State

Entity Name: AZALEA PARK COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

8709 11TH AVE. PL. N.W.
BRADENTON, FL 34209

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 14312
BRADENTON, FL 342804312

New Mailing Address:

FEI Number: 59-2717024

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAGINNESS, MICHAEL O
8709 11TH AVE. PL. N.W.
BRADENTON, FL 34209 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: GILCHRIST, TIM
Address: 8829 12TH AVENUE N. W.
City-St-Zip: BRADENTON, FL 34209

Title: SD () Delete
Name: COLLINS, MURLE
Address: 8706 11TH AVENUE PL. N. W.
City-St-Zip: BRADENTON, FL 34209

Title: TD () Delete
Name: MAGINNESS, MICHAEL
Address: 8709 11 AVE PL. N.W.
City-St-Zip: BRADENTON, FL 34209

Title: VPD () Delete
Name: GRANT, BECKY
Address: 1213 89TH ST NE
City-St-Zip: BRADENTON, FL 34209

Title: PD () Delete
Name: HALL, DOUG
Address: 8817 11TH AVE TERR. N.W.
City-St-Zip: BRADENTON, FL 34209

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PETRILLO, TOM
Address: 1209 89TH STREET N. W.
City-St-Zip: BRADENTON, FL 34209

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

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

Title: SD (X) Change () Addition
Name: GRANT, BECKY
Address: 1213 89TH ST NE
City-St-Zip: BRADENTON, FL 34209

Title: VPD (X) Change () Addition
Name: ELLIOTT, ROBERT
Address: 1218 89TH STREET N. W.
City-St-Zip: BRADENTON, FL 34209

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: MICHAEL O. MAGINNESS

TD

04/30/2009

Electronic Signature of Signing Officer or Director

Date