

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13402

FILED
Apr 19, 2005
Secretary of State

Entity Name: ARBOR LAKE VILLAS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

6015 MORROW
SUITE 107
JACKSONVILLE, FL 32217

New Principal Place of Business:

Current Mailing Address:

6015 MORROW
SUITE 107
JACKSONVILLE, FL 32217

New Mailing Address:

FEI Number: 59-2635308

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TERENCE K BANNING
6015 MORROW
SUITE 107
JACKSONVILLE, FL 32217 US

Name and Address of New Registered Agent:

BANNING MANAGEMENT, INC.
6015 MORROW
SUITE 107
JACKSONVILLE, FL 32217 US

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: BANNING MANAGEMENT INC

04/19/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COX, DANIEL
Address: 11972 HARBOUR COVE DR S
City-St-Zip: JACKSONVILLE, FL 32225

Title: VD () Delete
Name: HAYES, BOB
Address: 11928 HARBOUR COVE DR
City-St-Zip: JACKSONVILLE, FL 32225

Title: TD () Delete
Name: GERGANOUS, ROBERT
Address: 11956 HARBOUR COVE DR
City-St-Zip: JACKSONVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change () Addition
Name: HAYES, BOB
Address: 11928 HARBOUR COVE DR
City-St-Zip: JACKSONVILLE, FL 32225

Title: VPS (X) Change () Addition
Name: MCLAUGHLIN, JOAN
Address: 11964 HARBOUR COVE DR S
City-St-Zip: JACKSONVILLE, FL 32225

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DANIEL COX

P

04/19/2005

Electronic Signature of Signing Officer or Director

Date