

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16393

**FILED**  
**Feb 13, 2010**  
**Secretary of State**

**Entity Name:** LIMONA PLACE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

902 STRATFORD MANOR DR  
BRANDON, FL 33510 US

**New Principal Place of Business:**

**Current Mailing Address:**

902 STRATFORD MANOR DR  
BRANDON, FL 33510 US

**New Mailing Address:**

**FEI Number:** 59-2706230

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

OLESON, DONALD F  
902 STRATFORD MANOR DR  
BRANDON, FL 335102801 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: TD  
Name: OLESON, DONALD F  
Address: 902 STRATFORD MANOR DR  
City-St-Zip: BRANDON, FL 33510

Title: PD  
Name: STANSEL, SANDI  
Address: 904 STRATDFORD MANOR DR  
City-St-Zip: BRANDON, FL 33510

Title: VD  
Name: MUELLAR, BRENDA  
Address: 923 STRATFORD MANOR DR  
City-St-Zip: BRANDON, FL 33510

Title: D  
Name: MAUREEN, MONTALVO  
Address: 1406 OXFORDSHIRE CT  
City-St-Zip: BRANDON, FL 33510

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: DONALD OLESON

TD

02/13/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date