

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20598

FILED
Jan 12, 2009
Secretary of State

Entity Name: VALENCIA HILLS-UNIT III HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

4962 N. PALM AVE
WINTER PARK, FL 32792 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 677307
ORLANDO, FL 32867

New Mailing Address:

FEI Number: 59-3232776

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRASCA, JOSEPH
C/O PREFERRED COMMUNITY MGMT
4962 N PALM AVENUE
WINTER PARK, FL 32792 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: DV () Delete
Name: CABRERA, FRANK
Address: 210 DEMPSEY WAY
City-St-Zip: ORLANDO, FL 32835

Title: PD () Delete
Name: APUZZO, FRANK
Address: 4802 WASHINGTON AVE
City-St-Zip: ORLANDO, FL 32819

Title: S () Delete
Name: FOSTER, KATHLEEN
Address: 219 JEMOND CT
City-St-Zip: ORLANDO, FL 32818

Title: D () Delete
Name: MOCK, KYLE
Address: 8067 LESIA CIR
City-St-Zip: ORLANDO, FL 32835

Title: TD () Delete
Name: MCGARIGAL, PAUL
Address: 5333 GREENSIDE CT
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CHAILLE, ALLISON
Address: 305 DEMPSEY WAY
City-St-Zip: ORLANDO, FL 32835 US

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

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

Title: VD (X) Change () Addition
Name: MOCK, KYLE
Address: 8067 LESIA CIR
City-St-Zip: ORLANDO, FL 32835

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: JOSEPH FRASCA

MGR.

01/12/2009

Electronic Signature of Signing Officer or Director

Date