

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24531

FILED  
Jul 17, 2006  
Secretary of State

**Entity Name:** AVONDALE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

NOBLE BROKERAGE SERVICES  
1136 NE 14TH ST.  
OCALA, FL 34470

**New Principal Place of Business:**

**Current Mailing Address:**

2920 SE 23RD AVE  
OCALA, FL 34471 US

**New Mailing Address:**

**FEI Number:** 59-2955569 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

NOBLE BROKERAGE SERVICES  
1136 NE 14TH STREET  
OCALA, FL 34470 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: QUIGLEY, CONSTANCE  
Address: 2305 S.E. 30TH ST  
City-St-Zip: OCALA, FL 34471

Title: S ( ) Delete  
Name: SMITH, ELIZA  
Address: 2940 SE 23RD AVE  
City-St-Zip: OCALA, FL 34471

Title: TD ( ) Delete  
Name: ANTHONY, MORATO  
Address: 2215 SE 28TH PLACE  
City-St-Zip: OCALA, FL 34471

Title: TD ( ) Delete  
Name: OTZEL, DAVID  
Address: 2306 DSE 30TH STREET  
City-St-Zip: OCALA, FL 34471

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: S.WESLEY HERREN

MANA

07/17/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date