

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25339

FILED  
May 23, 2012  
Secretary of State

**Entity Name:** THE ASSOCIATION TO PRESERVE THE EATONVILLE COMMUNITY, INC.

**Current Principal Place of Business:**

227 E. KENNEDY BLVD.  
EATONVILLE, FL 32751 US

**New Principal Place of Business:**

**Current Mailing Address:**

227 E KENNEDY BLVD.  
EATONVILLE, FL 32751 US

**New Mailing Address:**

**FEI Number:** 59-2952662

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PRESERVE EATONVILLE COMMUNITY, INC.  
227 E. KENNEDY BLVD.  
EATONVILLE, FL 32751 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: VP  
Name: JOSE-FRANCOIS, MARIE  
Address: 2542 FLETCH CT  
City-St-Zip: LAKE MARY, FL 32746

Title: P  
Name: KORNEGAY, THOMAS  
Address: 711 W AMELIA ST  
City-St-Zip: ORLANDO, FL 32805

Title: S  
Name: MCKENDRICK, WINFRED  
Address: 323 E KENNEDY BLVD, SUITE B  
City-St-Zip: EATONVILLE, FL 32751

Title: T  
Name: HARA, TADAYUKI  
Address: 9907 UNIVERSAL BLVD, SUITE 231-A  
City-St-Zip: ORLANDO, FL 32819

Title: D  
Name: MCWHITE, ERNESTINE E  
Address: 269 AMADOR CIRCLE  
City-St-Zip: ORLANDO, FL 32810

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: N.Y NATHIRI

DIR

05/23/2012

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

\_\_\_\_\_  
Date