

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27914

FILED
Apr 14, 2008
Secretary of State

Entity Name: ALOMA BUSINESS CENTER, A CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6976 ALOMA AVE.
WINTER PARK, FL 32792

New Principal Place of Business:

Current Mailing Address:

3216 CORRINE DR.
ORLANDO, FL 32803 US

New Mailing Address:

FEI Number: 59-2913391

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAGDIN, MARK N
3216 CORRINE DR.
ORLANDO, FL 32803 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: SD () Delete
Name: KROMBACH, PHIL
Address: 178 VERONA DR
City-St-Zip: KISSIMMEE, FL 34759

Title: PD () Delete
Name: GREENE, JAMES A
Address: 6980 ALOMA AVE
City-St-Zip: WINTER PARK, FL 32792

Title: VD () Delete
Name: DICK, GRACE
Address: 6870 ALOMA AVE
City-St-Zip: WINTER PARK, FL 32792

Title: D () Delete
Name: SANG, LINDA
Address: 6976 ALOMA AVE.
City-St-Zip: WINTER PARK, FL 32792

Title: TD () Delete
Name: FITZSIMONS, JIM
Address: 100 BRIDGEWOOD CT
City-St-Zip: WINTER SPRINGS, FL 32708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CLARKE, SCOTT
Address: PO BOX 1629
City-St-Zip: GOLDENROD, FL 32733

Title: VP (X) Change () Addition
Name: GREENE, JAMES A
Address: 6980 ALOMA AVE
City-St-Zip: WINTER PARK, FL 32792

Title: D (X) Change () Addition
Name: CARBONE, NATE
Address: 6952 ALOMA AVE
City-St-Zip: WINTER PARK, FL 32792

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 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: SCOTT CLARKE

PD

04/14/2008

Electronic Signature of Signing Officer or Director

Date