

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29177

FILED
Feb 27, 2007
Secretary of State

Entity Name: AVALON OWNERSHIP ASSOCIATION, INC.

Current Principal Place of Business:

C/O ACTION REAL ESTATE SERVICES
6110-B NW 1 PL
GAINESVILLE, FL 32607 US

New Principal Place of Business:

Current Mailing Address:

C/O ACTION REAL ESTATE SERVICES
6110-B NW 1 PL
GAINESVILLE, FL 32607 US

New Mailing Address:

FEI Number: 59-2990974 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAUSAMAN, JEFFREY D
C/O ACTION REAL ESTATE SERVICES
6110-B NW 1 PLACE
GAINESVILLE, FL 32607 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: DST () Delete
Name: DUNHAM, NICK
Address: 8411 SW 19 N
City-St-Zip: GAINESVILLE, FL 32607

Title: D () Delete
Name: COBLE, DONALD
Address: 1626 SW 82ND TER
City-St-Zip: GAINESVILLE, FL 32607

Title: D () Delete
Name: SAMS, CHARLES
Address: 1920 SW 86TH TER
City-St-Zip: GAINESVILLE, FL 32607

Title: D () Delete
Name: RUSSELL, BRENT
Address: 1711 SW 82ND TER
City-St-Zip: GAINESVILLE, FL 32607

Title: DP () Delete
Name: WYSZKOWSKI, ALEJANDRO
Address: 1627 SW 82ND TER
City-St-Zip: GAINESVILLE, FL 32607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DV (X) Change () Addition
Name: DUNHAM, NICK
Address: 8411 SW 19 N
City-St-Zip: GAINESVILLE, FL 32607

Title: DST (X) Change () Addition
Name: KOERNER, FRED
Address: 8603 SW 16TH LANE
City-St-Zip: GAINESVILLE, FL 32607

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: ALEJANDRO WYSZKOWSKI

P

02/27/2007

Electronic Signature of Signing Officer or Director

_____ Date