

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40814

FILED  
Apr 28, 2009  
Secretary of State

**Entity Name:** PRIMERA OWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

1516 E HILLCREST ST  
STE 210  
ORLANDO, FL 32803 US

**New Principal Place of Business:**

**Current Mailing Address:**

1516 E HILLCREST ST  
STE 210  
ORLANDO, FL 32803 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

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

PALMETTO CHARTER SERVICES, INC.  
150 MAGNOLIA AVENUE  
DAYTONA BEACH, FL 32114 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: PD ( ) Delete  
Name: ACTON, JOHN A  
Address: 2400 DIXIE FOREST RD  
City-St-Zip: RALEIGH, NC 27615

Title: VD ( ) Delete  
Name: WHIT, DUNCAN  
Address: 300 PRIMERA BLVD, SUITE 140  
City-St-Zip: LAKE MARY, FL 32746

Title: STD ( ) Delete  
Name: OWEN, LYNN W III  
Address: 480 S KELLER ROAD  
City-St-Zip: ORLANDO, FL 32810

Title: D ( ) Delete  
Name: MILLER, KEVIN  
Address: 1200 WEBER STREET  
City-St-Zip: ORLANDO, FL 32803

Title: D ( ) Delete  
Name: ROSS, JAMIE  
Address: 31525 W TWELVE MILE ROAD, SUITE LL1  
City-St-Zip: FARMINGTON HILLS, MI 48334

Title: D ( ) Delete  
Name: LANE, FRED  
Address: 231 WEST MINNESOTA AVENUE  
City-St-Zip: DELAND, FL 32720

**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:

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: JOHN A. ACTON

PD

04/28/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date