

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43495

FILED
Apr 06, 2007
Secretary of State

Entity Name: ALPINE HEIGHTS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

PMB 345, 4250 ALAFAYA TR
SUITE 212
OVIEDO, FL 32765 US

New Principal Place of Business:

Current Mailing Address:

PMB 345, 4250 ALAFAYA TR
SUITE 212
OVIEDO, FL 32765 US

New Mailing Address:

FEI Number: 59-3152406

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURNSIDE, LILLY
LILLY BURNSIDE C/O RELIABLE PROPERTY MGRS.
PMB 345, 4250 ALAFAYA TR, STE 212
OVIEDO, FL 32762 US

Name and Address of New Registered Agent:

RELIABLE PROPERTY MANAGERS
4250 ALAFAYA TRAIL
SUITE 212-345
OVIEDO, FL 32762 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: CURTIS BURNSIDE

04/06/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROMEL, JACK
Address: 1943 TROPIC BAY CT
City-St-Zip: ORLANDO, FL 32807 US

Title: S () Delete
Name: GONZALEZ, LIDUVINA
Address: 1903 TROPIC BAY CT
City-St-Zip: ORLANDO, FL 32807

Title: T () Delete
Name: CARLE, TINA
Address: 2064 TROPIC BAY CT
City-St-Zip: ORLANDO, FL 32807

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:

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: JACK ROMEL

P

04/06/2007

Electronic Signature of Signing Officer or Director

Date