

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000331

FILED  
Apr 06, 2011  
Secretary of State

**Entity Name:** LOMA DEL SOL HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

335 HAVENDALE BLVD  
AUBURNDALE, FL 33823 US

**New Principal Place of Business:**

417 HAVENDALE BLVD  
AUBURNDALE, FL 33823 US

**Current Mailing Address:**

335 HAVENDALE BLVD  
AUBURNDALE, FL 33823

**New Mailing Address:**

417 HAVENDALE BLVD  
AUBURNDALE, FL 33823

**FEI Number:** 65-0372025

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHILTON, ROBERT C ESQ  
99 6 ST SW  
WINTER HAVEN Q, FL 338800 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  
Name: DEFEO, LUCILLE  
Address: 333 VIA MARIEL DR  
City-St-Zip: DAVENPORT, FL 33896

Title: ST  
Name: MARINIELLO, MARYLU  
Address: 202 VIA MARIEL EAST DR  
City-St-Zip: DAVENPORT, FL 338966544

Title: VP  
Name: LONG, JOHN  
Address: 137 RIO CT  
City-St-Zip: DAVENPORT, FL 33896

Title: D  
Name: CARDINALE, FRANK  
Address: 141 VIA MARIEL DRIVE  
City-St-Zip: DAVENPORT, FL 33896

Title: D  
Name: AUSTER, NEIL  
Address: 234 LOMA DEL SOL DRIVE  
City-St-Zip: DAVENPORT, FL 33896

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:** LUCILLE DEFEO

PD

04/06/2011

Electronic Signature of Signing Officer or Director

Date