## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000001932

Apr 21, 2009 Secretary of State

Entity Name: ALOMA WOODS/ESTATES AT ALOMA WOODS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business: %PREMIER COMMUNITY MANAGERS** 

5151 ADANSON ST SUITE 103 ORLANDO, FL 32804

**New Mailing Address: Current Mailing Address:** 

%PREMIER COMMUNITY MANAGERS 5151 ADANSON ST SUITE 103 ORLANDO, FL 32804

FEI Number: 59-3237900 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HOUSE, GARY %PREMIER COMMUNITY MGRS.INC. 5151 ANDERSON ST SUITE 103 ORLANDO, FL 32804 US

5745 OAK LAKE TR

OVIEDO, FL 32765

SHARP, GEORGE

OVIEDO, FL 32765

2886 ALOMA OAKS DR.

() Delete

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:

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

Date

## Electronic Signature of Registered Agent

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

**OFFICERS AND DIRECTORS:** () Delete () Change () Addition HAND, ROBIN Name: Name: 2787 CYPRESS HEAD TRL Address: Address: City-St-Zip: OVIEDO, FL 32765 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition FOUNTAIN, KAREN Name: CHENOWETH, JOHN Name: Address: 2878 OAK BLUFF WAY Address: 5745 OAK LAKE TRAIL City-St-Zip: OVIEDO, FL 32765 City-St-Zip: OVIEDO, FL 32765 Title: () Delete Title: (X) Change ( ) Addition TASKAN, BERNA JOHNSON, RIC Name: Name: 2991 SABEL OAK PL 2640 ALOMA OAKS DR Address: Address: City-St-Zip: OVIEDO, FL 32765 City-St-Zip: OVIEDO, FL 32765 Title: () Delete Title: SD (X) Change ( ) Addition WALKER, JUDY Name: Name: WALKER, JUDY Address: 5353 RED LEAF CT Address: 5353 RED LEAF CT City-St-Zip: OVIEDO, FL 32765 City-St-Zip: OVIEDO, FL 32765 Title: ( ) Delete Title: (X) Change ( ) Addition CHENOWETH, JOHN R RUBIN, STEWART Name: Name:

2944 CYPRES CHASE Address: City-St-Zip: OVIEDO, FL 32765

Title: (X) Change ( ) Addition

TASKAN, BERNA Name: Address: 2991 SABEL OAK PL OVIEDO, FL 32765 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 CHENOWETH **PRES** 04/21/2009