

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002900

FILED
Mar 24, 2009
Secretary of State

Entity Name: ALAMAR VILLAGE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

545 SE 131ST STREET
OCALA, FL 34480 US

New Principal Place of Business:

Current Mailing Address:

545 SE 131ST STREET
OCALA, FL 34480 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:

BIANCULLI, RICHARD S
545 SE 131ST STREET
OCALA, FL 34480 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: D () Delete
Name: MANRESA, CARLOS
Address: 570 SE 131ST STREET
City-St-Zip: OCALA, FL 34480

Title: D () Delete
Name: ETHRIDGE, TRACY
Address: 920 SE 131 STREET
City-St-Zip: OCALA, FL 34480

Title: P () Delete
Name: DAVIS, LINDSEY
Address: 611 SE 131ST STREET
City-St-Zip: OCALA, FL 34480

Title: D () Delete
Name: CLIFFORD, TODD
Address: 540 SE 131ST STREET
City-St-Zip: OCALA, FL 34480

Title: T/S () Delete
Name: BIANCULLI, RICHARD
Address: 545 SE 131ST STREET
City-St-Zip: OCALA, FL 34480

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:

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: RICHARD BIANCULLI

T/S

03/24/2009

Electronic Signature of Signing Officer or Director

Date