2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N97000002251



FILED
Mar 17, 2003 8:00 am
Secretary of State

ALOMA V								
	WOODS NORTH MASTER AS	SSOCIATION, INC.) 03-	17-2003 91070	00701	1.23
Principal Pla	ice of Business	Mailing Address			-			
		PO BOX 915322						
WINTER SPRINGS FL 32708 LONGWOOD FL 32791								
					1 (88)3161 816 (6)31 (1)	.	11 4 8 11 8 12 8 16 11 8 9 1	188 0
2. Principal i	Place of Business	3. Mailing Address						
Suite, Apt	t. #, etc.	Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES				
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City & Sta	ite	City & State			4. FE! Number 59-3	449562	 	oplied For
Zip	Country	Zip	Cou	intry			\$8.75 Add	ot Applicable
'	/			-···· ,	5. Certificate of Status	Desired	Fee Require	
	6. Name and Address of Curren	t Registered Agent			7. Name and Address	of New Registere	d Agent	
				Name Va H	mul Associa	Loi Mana	usemat	Ca.
	AL ASSO MOT CO.			Street Address ((P.O. Box Number is Not A	(cceptable)	Just	<u> </u>
	ST SR 434 SPRINGS FL 32708							
AAIIATEK	SPRINGS FL 32/00							
				City		F	Zip Cod	e
8. The above	e named entity submits this statement t	for the purpose of changing its	registere	ed office or register	red agent, or both, in the	State of Florida. I a	m familiar with,	and accept
the obliga	ations of registered agent.				•		,	
	100	11.		Police	Pac	2/15	4/12	:
SIGNATURE	Signature, typed or printed name of registered ager	at and title if applicable (NOT	F. Registerer	d Agent signature required	d when reinstating)	3/2	<u>リュン</u>	
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	THE NAME OF THE 18 AS A SEC.	9. Election Car	mnainn F	inancing	\$5.00 w. s	Make Che	eck Payable	to
	FILE NOW: FEE IS \$61.25	Trust Fund (~ —	\$5.00 May Be Added to Fees	Florida Dep		
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indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

407-327-5824