

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004751

FILED
Jan 27, 2012
Secretary of State

Entity Name: BALMORAL OF NORTH FLORIDA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

500 NW 43RD ST, SUITE 3
GAINESVILLE, FL 32607 US

New Principal Place of Business:

105 SW 140TH COURT
SUITE 5
JONESVILLE, FL 32669 US

Current Mailing Address:

500 NW 43RD ST, SUITE 3
GAINESVILLE, FL 32607 US

New Mailing Address:

105 SW 140TH COURT
SUITE 5
JONESVILLE, FL 32669 US

FEI Number: 59-3567874

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORNERSTONE PROPERTY SOLUTIONS OF N CENTR
500 NW 43RD ST SUITE 3
GAINESVILLE, FL 32607 US

Name and Address of New Registered Agent:

CORNERSTONE PROPERTY SOLUTIONS OF N CENTR
105 SW 140TH COURT
SUITE 5
JONESVILLE, FL 32669 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: EUGENE HAUFLE

01/27/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: BURNE, ANDREA
Address: 1226 SW 115TH STREET
City-St-Zip: GAINESVILLE, FL 32607 US

Title: S
Name: BROCK, DAVID
Address: 1414 SW 115TH ST
City-St-Zip: GAINESVILLE, FL 32607

Title: VP
Name: RAMSEY, PAT
Address: 1020 SW 115TH STREET
City-St-Zip: GAINESVILLE, FL 32607

Title: T
Name: CODY-FARIBORIZAN, LORETTA
Address: 1308 SW 115TH ST
City-St-Zip: GAINESVILLE, FL 32607

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: ANDREA BURNE

P

01/27/2012

Electronic Signature of Signing Officer or Director

Date