

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005519

FILED  
Apr 17, 2009  
Secretary of State

**Entity Name:** AVALON COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

9031 TOWN CENTER PKWY  
BRADENTON, FL 34202

**New Principal Place of Business:**

**Current Mailing Address:**

9031 TOWN CENTER PKWY  
BRADENTON, FL 34202

**New Mailing Address:**

**FEI Number:** 65-0786771

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILSON, DOUGLAS  
C/O ADVANCED MANAGMENT, INC  
9031 TOWN CENTER PKWY  
BRADENTON, FL 34202 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: SD ( ) Delete  
Name: MORELLO, ROSE  
Address: 4931 LAKE SCENE PL  
City-St-Zip: SARASOTA, FL 34243

Title: TD ( ) Delete  
Name: NATHAN, GEORGE  
Address: 5026 LA AESSENE PL  
City-St-Zip: SARASOTA, FL 34243

Title: DP ( ) Delete  
Name: SCHUCH, JAMES  
Address: 4929 LAKE SCENE PL  
City-St-Zip: SARASOTA, FL 34243

Title: DVP ( ) Delete  
Name: PALTOW, ROBERT  
Address: 5051 LAHASSENO PL  
City-St-Zip: SARASOTA, FL 34243

Title: D ( ) Delete  
Name: LONGHI, FRED  
Address: 5043 LAKE SCENE PL  
City-St-Zip: SARASOTA, FL 34243

**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: DVP (X) Change ( ) Addition  
Name: PLATOW, ROBERT  
Address: 5051 LAHASSENO PL  
City-St-Zip: SARASOTA, FL 34243

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: GEORGE NATHAN

TD

04/17/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date