

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Apr 17, 2007**  
**Secretary of State**

DOCUMENT# N98000004403

**Entity Name:** AVALON PARK PROPERTY OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**8009 S. ORANGE AVE.  
ORLANDO, FL 32809**New Principal Place of Business:**13001 FOUNDERS SQUARE  
ORLANDO, FL 32828**Current Mailing Address:**13001 FOUNDERS SQUARE  
ORLANDO, FL 32828**New Mailing Address:**8009 S ORANGE AVE  
ORLANDO, FL 32809**FEI Number:** 59-3569797**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**LELAND MANAGEMENT  
8009 S. ORANGE AVENUE  
ORLANDO, FL 32809 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:** PD ( ) Delete  
**Name:** KAHLI, BEAT  
**Address:** 13001 FOUNDERS SQUARE DRIVE  
**City-St-Zip:** ORLANDO, FL 32828**Title:** VD ( ) Delete  
**Name:** HALLE, ROSS  
**Address:** 13001 FOUNDERS SQUARE DR.  
**City-St-Zip:** ORLANDO, FL 32828**Title:** TD ( ) Delete  
**Name:** EWING, KEITH  
**Address:** 13001 FOUNDERS SQUARE DRIVE  
**City-St-Zip:** ORLANDO, FL 32828**Title:** D ( ) Delete  
**Name:** MILLER, JOSEPH  
**Address:** 13307 LAKE LIVE OAK DRIVE  
**City-St-Zip:** ORLANDO, FL 32828**Title:** D ( ) Delete  
**Name:** DE COCQ, JAMES  
**Address:** 1906 TORCHWOOD DRIVE  
**City-St-Zip:** ORLANDO, FL 32828**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** VD (X) Change ( ) Addition  
**Name:** WEBER, GARY  
**Address:** 13001 FOUNDERS SQUARE DR.  
**City-St-Zip:** ORLANDO, FL 32828**Title:** TD (X) Change ( ) Addition  
**Name:** HODSON, STEPHANIE  
**Address:** 13001 FOUNDERS SQUARE DRIVE  
**City-St-Zip:** ORLANDO, FL 32828**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 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: BEAT KAHLI

P

04/17/2007

Electronic Signature of Signing Officer or Director

Date