

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000058288

FILED
Apr 10, 2008
Secretary of State

Entity Name: AVALON PORTFOLIO MANAGEMENT, INC.

Current Principal Place of Business:

9708 AVALON WOODS DR
WINTER GARDEN, FL 34787

New Principal Place of Business:

Current Mailing Address:

PO BOX 783246
WINTER GARDEN, FL 34778

New Mailing Address:

9708 AVALON WOODS DR
WINTER GARDEN, FL 34787

FEI Number: 59-3748670

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAWRENCE, RICHARD C
9708 AVALON WOODS DRIVE
WINTER GARDEN, FL 34787 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LAWRENCE, RICHARD C
Address: 9708 AVALON WOODS DRIVE
City-St-Zip: WINTER GARDEN, FL 34787

Title: STD () Delete
Name: LAWRENCE, HAYRIYE
Address: 9708 AVALON WOODS DR
City-St-Zip: WINTER GARDEN, FL 34787

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD C. LAWRENCE

PD

04/10/2008

Electronic Signature of Signing Officer or Director

Date