### 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003657

Entity Name: ST. ALBAN'S WOOD OWNERS ASSOCIATION, INC.

FILED
Mar 27, 2015
Secretary of State
CC9203610997

## **Current Principal Place of Business:**

11820 TURKEY CREEK BLVD. ALACHUA, FL 32615

# **Current Mailing Address:**

P.O. BOX 310

ALACHUA. FL 32616-0310 US

FEI Number: 59-3733881 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

ASSOCIATION MANAGEMENT SOLUTIONS 11820 TURKEY CREEK BLVD. ALACHUA, FL 32615 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: SARAH L. BEAVERS 03/27/2015

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title **PRESIDENT** Title **SECRETARY** JONES, BRITTON Name Name SHELLEY, LAURIE **527 TURKEY CREEK** Address 255 TURKEY CREEK Address City-State-Zip: ALACHUA FL 32615 ALACHUA FL 32615 City-State-Zip:

Title TREASURER

Name BENNETT, STEPHEN
Address 831 TURKEY CREEK
City-State-Zip: ALACHUA FL 32615

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: BRITTON JONES

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

03/27/2015