

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000003657

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

**Current Principal Place of Business:**

5550 NW 111TH BLVD.  
GAINESVILLE, FL 32653

**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  
5550 NW 111TH BLVD.  
GAINESVILLE, FL 32653 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

04/04/2013

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           JONES, BRITTON  
Address        527 TURKEY CREEK  
City-State-Zip: ALACHUA FL 32615

Title           PRESIDENT  
Name           BAGOMOLNY, CASSIE  
Address        744 TURKEY CREEK  
City-State-Zip: ALACHUA FL 32615

Title           SECRETARY  
Name           SHELLEY, LAURIE  
Address        255 TURKEY CREEK  
City-State-Zip: ALACHUA FL 32615

Title           DIRECTOR  
Name           BLACK, DONNA  
Address        483 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:** CASSIE BAGOMOLNY

PRESIDENT

04/04/2013

Electronic Signature of Signing Officer/Director Detail

Date