## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#717844** 

City-St-Zip:

Entity Name: MODEL VILLAGE UNIT ONE, INC.

FILED Mar 05, 2009 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:			
950 N. CO 415	LLIER BLVD		950 N. COLLIER BLVD 420				
MARCO ISLAND, FL 34145 US				MARCO ISLAND, FL 34145 US			
Current Mailing Address:				New Mailing Address:			
PO BOX 1 MARCO IS	123 SLAND, FL 34	1461123 US					
FEI Number	: 59-1595673	FEI Number Applied For ( )	FEI Nun	nber Not Appli	icable ( )	Certific	cate of Status Desired ( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
NEW BEGINNINGS 9501 N. COLLIER BLVD 415 MARCO ISLAND, FL 34145 US				NEW BEGINNINGS 950 N. COLLIER BLVD 420 MARCO ISLAND, FL 34145 US			
	e named entity e of Florida.	submits this statement for the	e purpose o	f changing it	ts registered	office or	registered agent, or both,
SIGNATU	RE: TAMMY (		03/05/2009				
Electronic Signature of Registered Agent				Date			
OFFICER	S AND DIREC	TORS:		ADDITION	S/CHANGES	TO OF	FICERS AND DIRECTOR
Title: Name: Address: City-St-Zip:	SD ( JOCKE, ANDY 1152 BALD EA MARCO ISLAN			Title: Name: Address: City-St-Zip:	(	) Change	( ) Addition
Title: Name: Address: City-St-Zip:	P ( SCUMACCI, R/ 1146 BALD EA MARCO ISLAN	GLE DR., D-8		Title: Name: Address: City-St-Zip:	(	) Change	( ) Addition
Title: Name: Address: City-St-Zip:	PACE, JOSEPI 1777 CRYSTAI			Title: Name: Address: City-St-Zip:	D () PACE, JOSEP 13408 DELAN HUNTLEY, IL	H EY ROAD	( ) Addition
Title: Name: Address: City-St-Zip:	(	) Delete		Title: Name: Address: City-St-Zip:	D ( PAOLETTI, RC 4123 JUDD SHILLER PAR	SELYNN	
Title: Name:	(	) Delete		Title: Name:	D ( HJORTLAND,	SANDY	(X) Addition

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.

City-St-Zip: INGLESIDE, IL 60041

SIGNATURE: RALPH SCUMACCI P 03/05/2009