

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002010

FILED
Apr 28, 2009
Secretary of State

Entity Name: THE ESTUARY OF MOBBLY BAY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3980 TAMPA RD
STE 202
OLDSMAR, FL 34677

New Principal Place of Business:

3980 TAMPA RD
STE 202
OLDSMAR, FL 34677 US

Current Mailing Address:

3980 TAMPA RD
STE 202
OLDSMAR, FL 34677

New Mailing Address:

3980 TAMPA RD
STE 202
OLDSMAR, FL 34677 US

FEI Number: 59-3737093

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARTOLETTA, JAMES M
19001 SUNLAKE BLVD.
LUTZ, FL 33558 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: D () Delete
Name: RICKARD, JAMES I III
Address: 212 MOBBLY BAY DRIVE
City-St-Zip: OLDSMAR, FL 34677

Title: D () Delete
Name: HANNAH, CHARLES A
Address: 19001 SUNLAKE BLVD
City-St-Zip: LUTZ, FL 33558

Title: D () Delete
Name: BARTOLETTA, JAMES M
Address: 19001 SUNLAKE BLVD.
City-St-Zip: LUTZ, FL 33558

Title: D () Delete
Name: KIRCHNER, SCOTT
Address: 19001 SUNLAKE BLVD.
City-St-Zip: LUTZ, FL 33558

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: RICKARD, JAMES I
Address: 212 MOBBLY BAY DRIVE
City-St-Zip: OLDSMAR, FL 34677 US

Title: D (X) Change () Addition
Name: HANNAH, CHARLES A
Address: 19001 SUNLAKE BLVD
City-St-Zip: LUTZ, FL 33558 US

Title: D (X) Change () Addition
Name: BARTOLETTA, JAMES M
Address: 19001 SUNLAKE BLVD.
City-St-Zip: LUTZ, FL 33558 US

Title: D (X) Change () Addition
Name: KIRCHNER, SCOTT
Address: 19001 SUNLAKE BLVD.
City-St-Zip: LUTZ, FL 33558 US

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.

SIGNATURE: JAMES I RICKARD

D

04/28/2009

Electronic Signature of Signing Officer or Director

Date