## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000002487

FILED Apr 30, 2008 Secretary of State

Entity Name: MAGNOLIA COURT HOMEOWNERS ASSOCIATION, INC.

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Current Principal Place of Business:				New Principal Place of Business:			
C/O HAAG MANAGEMENT INC. 2295 NW CORPORATE BLVD STE 138 BOCA RATON, FL 33431				C/O BANYAN PROPERTY MANAGEMENT 2328 S CONGRESS AVE STE 1-C WEST PALM BEACH, FL 33406			
Current Mailing Address:				New Mailing Address:			
C/O HAAG MANAGEMENT INC. 2295 NW CORPORATE BLVD STE 138 BOCA RATON, FL 33431				C/O BANYAN PROPERTY MANAGEMENT 2328 S CONGRESS AVE STE 1-C WEST PALM BEACH, FL 33406			
FEI Number:	04-3655630	FEI Number Applied For ( )	FEI Num	nber Not Appli	cable ( )	Certificate o	f Status Desired ( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
HAAG MANAGEMENT, INC. 2295 NW CORPORATE BLVD SUITE 138 BOCA RATON, FL 33431 US The above named entity submits this statement for the purpose of				BECKER AND POLIAKOFF, PA 625 N. FLAGLER DRIVE 7TH FLOOR WEST PALM BEACH, FL 33406 US of changing its registered office or registered agent, or both.			
in the State	of Florida.						
SIGNATURE: BECKER AND POLIAKOFF				04/30/2008			
	Electronic	Signature of Registered Ager	nt			Dat	e
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	D () C GATES, DAVID 337 S BROMELIA WEST PALM BEA			Title: Name: Address: City-St-Zip:	(	) Change ()A	ddition
Title: Name: Address: City-St-Zip:	T () C WILLIAMS, CHAF 346 TUXEDO LN WEST PALM BEA			Title: Name: Address: City-St-Zip:	(	) Change ()A	ddition
Title: Name: Address: City-St-Zip:	VP () C SAIN, ERIC 316 N. BROMELI. WEST PALM BEA			Title: Name: Address: City-St-Zip:	SMITH, DONAL 333 SOUTH BE		
Title: Name: Address: City-St-Zip:	P () E WEISS, STUART 324 N. BROMELA WEST PALM BEA	AID		Title: Name: Address: City-St-Zip:	P (X MASRI, MARY P.O. BOX 316 PALM BEACH,	7	ddition
Title: Name: Address: City-St-Zip:	S () E MASRI, MARY P.O. BOX 3167 PALM BEACH, FL	Delete _ 33480		Title: Name: Address: City-St-Zip:	WEISS, STUA 324 N. BROME		

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: MARY MASRI PD 04/30/2008