

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003982

FILED  
May 05, 2007  
Secretary of State

**Entity Name:** MOSS PARK MASTER HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

450 S ORANGE AVE, R -3  
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

C/O LELAND MANAGEMENT  
8009 S ORANGE AVE  
ORLANDO, FL 32809

**New Mailing Address:**

**FEI Number:** 01-0709676      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

MEYER, MARK  
P.O. BOX 4920  
ORLANDO, FL 32802      US

**Name and Address of New Registered Agent:**

LELAND MANAGEMENT  
8009 SOUTH ORANGE AVE  
ORLANDO, FL 32809      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: REBECCA FURLOW

05/05/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: BRUEHL, J ROGER  
Address: 100 LAKE HART DR  
City-St-Zip: ORLANDO, FL 328320100

Title: DP      ( ) Delete  
Name: BERLINSKY, JAY  
Address: P.O. BOX 4120  
City-St-Zip: ORLANDO, FL 32802

Title: D      ( ) Delete  
Name: LIPPS, ROBERT T  
Address: 11221 JOHN WYCLIFF BLVD  
City-St-Zip: ORLANDO, FL 32832

Title: D      ( ) Delete  
Name: FLANIKEN, FORREST W  
Address: 11221 JOHN WYCLIFF BLVD  
City-St-Zip: ORLANDO, FL 32832

Title: VPD      ( ) Delete  
Name: MEYER, MARK  
Address: P.O. BOX 4920  
City-St-Zip: ORLANDO, FL 32802

Title: DST      ( ) Delete  
Name: BROWN, MORGAN  
Address: 450 S ORANGE AVE  
City-St-Zip: ORLANDO, FL 32801

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JAY BERLINSKY

DP

05/05/2007

Electronic Signature of Signing Officer or Director

Date