

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19715

FILED  
Apr 27, 2010  
Secretary of State

**Entity Name:** THE MAGNOLIA GARDEN VILLAS ASSOCIATION, INC.

**Current Principal Place of Business:**

1136 NORTHEAST 14TH STREET  
OCALA, FL 34470 US

**New Principal Place of Business:**

**Current Mailing Address:**

1136 NORTHEAST 14TH STREET  
OCALA, FL 34470 US

**New Mailing Address:**

FEI Number: 59-2762267

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MOLHAN, LOU  
1136 NORTHEAST 14TH STREET  
OCALA, FL 34470 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: PD  
Name: MOLHAN, LOU  
Address: 1136 NE 14TH ST  
City-St-Zip: Ocala, FL 34470

Title: VD  
Name: STEINACKER, DELANO  
Address: 1136 NE 14TH ST  
City-St-Zip: Ocala, FL 34470

Title: SD  
Name: SHOAF, JILL  
Address: 1136 NE 14TH ST  
City-St-Zip: Ocala, FL 34470

Title: TD  
Name: FANTE, JOE  
Address: 1136 NE 14TH ST  
City-St-Zip: Ocala, FL 34470

Title: D  
Name: DEJOHN, BOB  
Address: 1136 NE 14TH ST  
City-St-Zip: Ocala, FL 34470

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: LOU MOLHAN

PD

04/27/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date