

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26430

FILED  
Jun 14, 2011  
Secretary of State

**Entity Name:** MAGNOLIA CHASE NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

1207 N. HIMES AVE.  
SUITE 3  
TAMPA, FL 33607 US

**New Principal Place of Business:**

**Current Mailing Address:**

1207 N. HIMES AVE.  
SUITE 3  
TAMPA, FL 33607 US

**New Mailing Address:**

**FEI Number:** 59-2960803

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

UNIQUE PROPERTY SERVICES, INC.  
1207 N. HIMES AVE.  
SUITE  
TAMPA, FL 33607 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: WIEST, GARY  
Address: 8939 MAGNOLIACHASE CIRLCE  
City-St-Zip: TAMPA, FL 33647

Title: D  
Name: THOMPSON, JOHN  
Address: 8949 MAGNOLIA CHASE CIRCLE  
City-St-Zip: TAMPA, FL

Title: TD  
Name: REDFORD, RICK  
Address: 8935 S MAGNOLIA CHASE CR  
City-St-Zip: TAMPA, FL 33647

Title: D  
Name: VAIL, ANDREA  
Address: 8940 MAGNOLIA CHASE CIRCLE  
City-St-Zip: TAMPA, FL 33647

Title: D  
Name: WORTLEY, ELIZABETH  
Address: 8916 MAGNOLIA CHASE CIRCLE  
City-St-Zip: TAMPA, FL 33647

Title: SD  
Name: MCCALLUM, CHARLES  
Address: 8933 MAGNOLIA CHASE CIRCLE  
City-St-Zip: TAMPA, FL 33647

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: GARY WIEST

PD

06/14/2011

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

\_\_\_\_\_  
Date