


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2006 8:00 am
Secretary of State

03-21-2006 90024 042 ****61.25

DOCUMENT # N41025					
1. Entity Name MV MANAGEMENT ASSOCIATION, INC.					
Principal Place of Business 6565 SUPERIOR AVE. SARASOTA, FL 34231 US		Mailing Address 3412 CLARK ROAD PMB #236 SARASOTA, FL 34231-8406 US			
2. Principal Place of Business 2028 CLARK ROAD		3. Mailing Address			
Suite, Apt. #, etc. SUITE #7		Suite, Apt. #, etc.			
City & State SARASOTA, FL		City & State			
Zip 34231	Country USA	Zip	Country	4. FEI Number 65-0242431	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
THE BARLOW GROUP, INC. 6565 SUPERIOR AVE SARASOTA, FL 34231			Name BARLOW GROUP, INC.		
			Street Address (P.O. Box Number is Not Acceptable) 2028 CLARK ROAD, SUITE #7		
			City SARASOTA, FL		
			Zip Code 34231		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE  JONE BARLOW WEIST, PRESIDENT, BARLOW GROUP, INC. 03/06/2006					
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State.					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BAKER, DOROTHY E 3412 CLARK RD. PMB #236 SARASOTA, FL 34231	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS WEIST, JONE B 3412 CLARK RD., PMB #236 SARASOTA, FL 34231	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FREDERICK, JOHN B 3412 CLARK RD. PMB #236 SARASOTA, FL 34231	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	D SCOTT, DANIEL E. 3412 CLARK RD., PMB #236 SARASOTA, FL 34231
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD GLENN, ROBERT C 3412 CLARK ROAD PMB #236 SARASOTA, FL 34231	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  JONE B. WEIST, AS			03/06/2006 (941) 927-1946		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		