

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003776

FILED
Apr 04, 2009
Secretary of State

Entity Name: MISSION ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

PO BOX 687
NOKOMIS, FL 342740687

New Principal Place of Business:

2431 SONOMA DRIVE
NOKOMIS, FL 342740687

Current Mailing Address:

PO BOX 687
NOKOMIS, FL 342740687

New Mailing Address:

P.O. BOX 687
NOKOMIS, FL 342740687

FEI Number: 59-0740825

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MADELEINE, HAULICK
2406 SONOMA DRIVE WEST
NOKOMIS, FL 34275 US

Name and Address of New Registered Agent:

MADELEINE, HAVLICK
2406 SONOMA DRIVE
NOKOMIS, FL 34275 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: MADELEINE HAVLICK

04/04/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CALO, RICHARD
Address: 2270 SONOMA DR E.
City-St-Zip: NOKOMIS, FL 34275 US

Title: DVP () Delete
Name: RANKIN, JOHN
Address: 2334 SONOMA DRIVE WEST
City-St-Zip: NOKOMIS, FL 34275 US

Title: DST () Delete
Name: HAVLICK, MADELEINE
Address: 2406 SONOMA DRIVE WEST
City-St-Zip: NOKOMIS, FL 34275 US

Title: T () Delete
Name: BERNSTEIN, DIANA
Address: 2205 SONOMA DRIVE EAST
City-St-Zip: NOKOMIS, FL 34275 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: MISSION ESTATES HOME, OWNERS ASSOCIATION, INC.
Address: 2431 SONOMA DRIVE
City-St-Zip: NOKOMIS, FL 34275 US

Title: DVP (X) Change () Addition
Name: ADDERLEY, ROBERT
Address: 2431 SONOMA DRIVE
City-St-Zip: NOKOMIS, FL 34275 US

Title: DST (X) Change () Addition
Name: HAVLICK, MADELEINE
Address: 2406 SONOMA DRIVE
City-St-Zip: NOKOMIS, FL 34275 US

Title: T (X) Change () Addition
Name: BERNSTEIN, DIANA
Address: 2205 SONOMA DRIVE
City-St-Zip: NOKOMIS, FL 34275 US

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: ROBERT ADDERLEY

DVP

04/04/2009

Electronic Signature of Signing Officer or Director

Date