2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#725706

FILED Apr 17, 2008 Secretary of State

Entity Name: MYAKKA VALLEY RANCHES IMPROVEMENT ASSOCIATION, INC.

Current P	Principal Place	ncipal Place of Business:		New Principal Place of Business:		
5291 MYAKKA VALLEY TRAIL SARASOTA, FL 34241				7020 MYAKKA VALLEY TRAIL SARASOTA, FL 34241		
Current M	Mailing Addres	ss:	New Mai	iling Address:		
PO BOX 2	YAKKA VALLE` 21463 FA, FL 342764		PO BOX 2	NYAKKA VALLEY TRAIL 21463 DTA, FL 34276		
FEI Number	: 59-1510999	FEI Number Applied For ()	FEI Number Not Ap	oplicable () Certificate of Status Desired ()		
Name and	d Address of C	Current Registered Agent:	Name an	nd Address of New Registered Agent:		
CORCORAN, JOHN 5291 MYAKKA VALLEY TRAIL SARASOTA, FL 34241 US			7020 MYA	HODGKINSON, DAVID 7020 MYAKKA VALLEY TRAIL SARASOTA, FL 34241 US		
	e named entity : e of Florida.	submits this statement for th	e purpose of changing	g its registered office or registered agent, or bo		
SIGNATU	RE: DAVID H	ODGKINSON		04/17/2008		
	Electror	nic Signature of Registered	Agent	Date		
OFFICER	S AND DIREC	TORS:	ADDITIO	ONS/CHANGES TO OFFICERS AND DIRECT		
Title: Name: Address: City-St-Zip:	VP () VIZZI, JACKIE 5537 OLD RAN SARASOTA, FL		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D () WILLMS, DAVII 6077 MYAKKA SARASOTA, FL	VALLEY TRAIL	Title: Name: Address: City-St-Zip:	T (X) Change () Addition FLEURY, THOMAS 4910 W. MYAKKA VALLEY TRAIL : SARASOTA, FL 34241		
Title: Name: Address: City-St-Zip:	S () BURGER, BEV 6118 HUPA SARASOTA, FL		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	P () JOHN, CORCO 5291 MYAKKA SARASOTA, FL	VALLEY TRAIL	Title: Name: Address: City-St-Zip:	P (X) Change () Addition DAVID, HODGKINSON 7020 MYAKKA VALLEY TRAIL : SARASOTA, FL 34241		
Title: Name: Address: City-St-Zip:	D () STRIKE, ALICE 6355 SIINGLITI SARASOTA, FL	REE TRAIL	Title: Name: Address: City-St-Zip:	D (X) Change () Addition STRIKE, ALICE 6355 SINGLETREE TRAIL : SARASOTA, FL 34241		
Title: Name:	D () SIMON, MARC) Delete	Title: Name:	D (X) Change () Addition HOUSTON, DEBORAH		

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: THOMAS FLEURY T 04/17/2008