2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008 8:00 am
Secretary of State
04-30-2008 90186 016 ****61.25

DOCUMENT # N47315

1. Entity Name
MUSE COMMUNITY ASSOCIATION, INC.

Principal Place of Business	Mailing Address
25895 LOBLOLLY BAY ROAD SW LABELLE, FL 33935	P.O. BOX 1875 D/C LABELLE, FL 33975

New 911 Address Change

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
3897 Loblolly Bay Rd.	3897 Loblolly Bay Rd
Suite, Apt. #, etc.: La Belle	Suite, Apt. #, etc.: La Belle
City & State: 71.	City & State: 71
Zip: 33935 Country: Glades	Zip: 33935 Country: Glades

03152008 Chg-NP CR2E037 (12/06)

4. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HEIN, STEVEN A
1115 SWINGING TRAIL MUSE
LABELLE, FL 33935

7. Name and Address of New Registered Agent

Name: JoAnne W. Aims
Street Address (P.O. Box Number is Not Acceptable): 4294 Loblolly Bay Rd.
City: La Belle FL Zip Code: 33935

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: JoAnne W. Aims (JoAnne W. Aims) 03-14-2008
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, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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	D, C KOEBERT, FRAN POB 2367 LABELLE, FL 33935	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DC Hein, Steven A. 1398 S. Swinging TRL. LaBelle, 71. 33935	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P RICHTER, JOSEPH 185 SUMMERAIL RD LABELLE, FL 33935	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P New 911 Address Richter, Joseph 1601 Summerall Rd. LaBelle, 71. 33935	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T HEIN, STEVEN A 1115 SWINGING TRAIL MUSE LABELLE, FL 33935	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Williamson, John E. 26390 Loblolly Bay Rd S.W. LaBelle, 71. 33935	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP CIANFRANI, JAMES 28535 GATE RD NW LABELLE, FL 33935	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP New 911 Address Cianfrani, James 1582 Gate Rd. LaBelle, 71. 33935	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S AIMS, JOANNE 26280 LOBLOLLY RD S.W LABELLE, FL 33935	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S New 911 Address Aims, JoAnne 4294 Loblolly Bay Rd LaBelle, 71. 33935	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D New 911 Address Change JOSHUN, MARCIA ~~1160 SILVER LAKE RD~~ 2168 Silver Lake Rd. LABELLE, FL 33935	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Friedman, Harris 1255 Tom Coker Rd. LaBelle, 71. 33935	☐ Change ☑ 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: JoAnne W. Aims 03-14-2008
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #