

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721826

FILED
Apr 21, 2009
Secretary of State

Entity Name: MADEIRA VILLA NORTH ASSOCIATION, INC.

Current Principal Place of Business:

2820 OCEAN SHORE BLVD
ORMOND BEACH, FL 32176 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 291844
PORT ORANGE, FL 32129 US

New Mailing Address:

2575 JOHN ANDERSON DR
ORMOND BEACH, FL 32176 US

FEI Number: 59-1428612

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUSAN GLAD BOOKKEEPING LLC
157 BRANDY HILLS DR.
PORT ORANGE, FL 32129 US

Name and Address of New Registered Agent:

TOMBLIN, DORIS
2575 JOHN ANDERSON DR
ORMOND BEACH, FL 32176 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: DORIS TOMBLIN

04/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: TOMBLIN, DORIS
Address: 1586 CRABAPPLE COVE CT N
City-St-Zip: JACKSONVILLE, FL 32225

Title: DT (X) Delete
Name: KERR, SUSAN
Address: PO BOX 391202
City-St-Zip: SNELLVILLE, GA 30039

Title: VP () Delete
Name: SHANK, ELLEN
Address: 104 W RIVIERA DR
City-St-Zip: LINDENHURST, NY 117574714

Title: DS () Delete
Name: HERMAN, VIOLET
Address: 9640 W FERNDAL
City-St-Zip: MANITOU BEACH, MI 49253

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: TOMBLIN, DORIS
Address: 2575 JOHN ANDERSON DR
City-St-Zip: ORMOND BEACH, FL 32176

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S/T (X) Change () Addition
Name: HERMAN, VIOLET
Address: 9640 W FERNDAL
City-St-Zip: MANITOU BEACH, MI 49253

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: DORIS TOMBLIN

DV

04/21/2009

Electronic Signature of Signing Officer or Director

Date