# I hereby 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 all other like empowered.

RECEIVER

SIGNATURE: PAMELA FLACK

Electronic Signature of Signing Officer/Director Detail

# DOCUMENT# N0500007175

# Entity Name: MAGNOLIA COURT CONDOMINIUM ASSOCIATION, INC.

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### **Current Principal Place of Business:**

5756 S SEMORAN BOULEVARD ORLANDO, FL 32822

### **Current Mailing Address:**

5756 S SEMORAN BOULEVARD ORLANDO, FL 32822 US

#### FEI Number: 20-4719869

#### Name and Address of Current Registered Agent:

HOUSE OF MANAGEMENT ENTERPRISES FOR COMMUNITY ASSOCIATIONS, INC. 5756 S SEMORAN BOULEVARD ORLANDO, FL 32822 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: MICHAEL E HOUSE

Electronic Signature of Registered Agent

#### **Officer/Director Detail :**

RECEIVER Title FLACK, PAMELA Name Address 5756 S SEMORAN BOULEVARD

City-State-Zip: ORLANDO FL 32822

FILED Jan 24, 2019 Secretary of State 6061312127CC

Certificate of Status Desired: No

01/24/2019 Date

01/24/2019 Date