

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26430

Entity Name: MAGNOLIA CHASE NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

7709 GIBSONTON DR.
GIBSONTON, FL 33534

FILED
Feb 01, 2024
Secretary of State
1151876642CC

Current Mailing Address:

P.O BOX 2878
RIVERVIEW, FL 33568 US

FEI Number: 59-2960803

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNIQUE PROPERTY SERVICES, INC.
7709 GIBSONTON DR.
GIBSONTON, FL 33534 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name REDFORD, RICHARD
Address 8935 S MAGNOLIA CHASE CR
City-State-Zip: TAMPA FL 33647

Title PRESIDENT
Name MCCALLUM, CHARLES
Address 8933 MAGNOLIA CHASE CIRCLE
City-State-Zip: TAMPA FL 33647

Title DIRECTOR
Name HILLARD, BRENDA
Address 8959 MAGNOLIA CHASE CIRCLE
City-State-Zip: TAMPA FL 33647

Title DIRECTOR
Name BEATTIE, MARTIN
Address 8934 MAGNOLIA CHASE CIRCLE
City-State-Zip: TAMPA FL 33647

Title MANAGER
Name MALLORY, CORINNE
Address P.O BOX 2878
City-State-Zip: RIVERVIEW FL 33568

Title SECRETARY
Name SCOZZARI, PETER
Address 8908 MAGNOLIA CHASE CIRCLE
City-State-Zip: TAMPA FL 33647

Title DIRECTOR
Name SUTTON, SHARON
Address 8953 MAGNOLIA CHASE CIRCLE
City-State-Zip: TAMPA FL 33647

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.

SIGNATURE: CORINNE MALLORY

MANAGER

02/01/2024

Electronic Signature of Signing Officer/Director Detail

Date