### 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47315

Entity Name: MUSE COMMUNITY ASSOCIATION, INC.

FILED Feb 13, 2019 Secretary of State 2975097802CC

# **Current Principal Place of Business:**

3897 LOBLOLLY BAY RD. LABELLE. FL 33935

## **Current Mailing Address:**

3897 LOBLOLLY BAY RD. LABELLE, FL 33935 US

FEI Number: 22-2269611 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

WILLIAMSON, JOHN 3897 LOBLOLLY BAY RD. LABELLE, FL 33935 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: JOHN WILLIAMSON 02/13/2019

Electronic Signature of Registered Agent

Date

### Officer/Director Detail:

Title PRES Title VP

Name HEIN, STEVE Name CALLAHAN, DANNY

Address 3897 LOBLOLLY BAY RD. Address 3897 LOBLOLLY BAY RD.

City-State-Zip: LABELLE FL 33935 City-State-Zip: LABELLE FL 33935

 Title
 TREA
 Title
 SECRETARY

 Name
 WILLIAMSON, JOHN
 Name
 LYLE, CONNIE

Address 26390 LOBLOLLY RD Address 3897 LOBLOLLY BAY RD.

City-State-Zip: LABELLE FL 33935

City-State-Zip: LABELLE FL 33935

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: JOHN WILLIAMSON

Electronic Signature of Signing Officer/Director Detail

**TREASURER** 

02/13/2019