

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 215976

Entity Name: MAGNOLIA ESTATES, INC.

FILED  
Jan 22, 2008  
Secretary of State

## Current Principal Place of Business:

231 W GORE AVE  
ORLANDO, FL 32806

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 993  
ORLANDO, FL 32802

## New Mailing Address:

FEI Number: 59-6065672

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILKINS, S. GAYDEN III  
231 W. GORE ST.  
ORLANDO, FL 32806 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: WILKINS, GAYDEN S III  
Address: 2459 PADDOCK WAY  
City-St-Zip: OVIEDO, FL 32765

Title: STD ( ) Delete  
Name: LONG, LYNN L  
Address: 100 SOUTH EOLA DRIVE #1403  
City-St-Zip: ORLANDO, FL 32801

Title: D ( ) Delete  
Name: ARKINS, PAMELA M  
Address: 4509 LAKE GEM CIRCLE  
City-St-Zip: ORLANDO, FL 32806

Title: D ( ) Delete  
Name: THOMAS, ANDREW B  
Address: 1625 LAKESIDE DRIVE  
City-St-Zip: DELAND, FL 32720

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: S. GAYDEN WILKINS, III

PRES

01/22/2008

Electronic Signature of Signing Officer or Director

Date