2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#718552

FILED Mar 26, 2009 Secretary of State

Entity Name: MAINLANDS SECTION FOUR CIVIC AND RECREATION ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4630 NORTHWEST 46TH STREET TAMARAC, FL 33319

Current Mailing Address: New Mailing Address:

4630 NORTHWEST 46TH STREET TAMARAC, FL 33319

FEI Number: 59-1430122 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ROBERT KAYE & ASSOCIATES, P.A. 6261 NW 6TH WAY FT LAUDERDALE, FL 33309

OFFICERS AND DIRECTORS:

ROSS, DOROTHY

4803 NW 48 AVE

TAMARAC, FL 33319

Name:

Address:

City-St-Zip:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete ROBERT, MALKOFF J SCHWARTZ, LOIS H Name: Name:

4722 NW 44TH CT Address: 4702 NW 44TH COURT Address: TAMARAC, FL 33319 City-St-Zip: TAMARAC, FL 33319 City-St-Zip:

Title: Title: (X) Change () Addition () Delete SCHWARTZ, LOIS Name: ECKERT, HARVEY Name:

Address: 4702 NW 44TH CT Address: 4502 NW 48TH AVENUE City-St-Zip: TAMARAC, FL 33319 City-St-Zip: TAMARAC, FL 33319

Title: () Delete Title: VP M (X) Change () Addition

LA FAYETTE, DORIS PUNCH, JANE Name: Name: 4513 NW 47TH TERRACE 4629 NW 45TH COURT Address: Address: City-St-Zip: TAMARAC, FL 33319 City-St-Zip: TAMARAC, FL 33319

Title: CTM () Delete Title: SEC (X) Change () Addition

Name: COOK, BEVERLY Name: LAURENO, CAROLYN 4503 NW 48TH AVENUE Address: 4636 NW 45 CT Address: City-St-Zip: TAMARAC, FL 33319 City-St-Zip: TAMARAC, FL 33319

Title: () Delete Title: (X) Change () Addition

MEZA, GLORIA FRIEDBERG, FLORENCE Name: Name: 4801 NW 48TH AVE 4718 NW 44TH COURT Address: Address: City-St-Zip: TAMARAC, FL 33319 City-St-Zip: TAMARAC, FL 33319

Title: () Delete 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LOIS H. SCHWARTZ **PRES** 03/26/2009