

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720141

FILED  
Apr 18, 2009  
Secretary of State

Entity Name: MADEIRA VILLA ASSOCIATION, INC.

## Current Principal Place of Business:

2810 OCEAN SHORE BLVD  
PO BOX 3186  
ORMOND BEACH, FL 32176

## New Principal Place of Business:

2810 OCEAN SHORE BLVD  
ORMOND BEACH, FL 32176

## Current Mailing Address:

POB 290682  
PORT ORANGE, FL 32129

## New Mailing Address:

FEI Number: 59-1386874      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SUSAN GLAD BOOKKEEPING LLC  
157 BRANDY HILLS DR  
PORT ORANGE, FL 32129      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

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: WHITE, HOLLIS  
Address: 2810 OCEAN SHORE BLVD, #30  
City-St-Zip: ORMOND BEACH, FL 32176

Title: DT ( ) Delete  
Name: TURNER, DONALD  
Address: 1886 ARDWICK RD  
City-St-Zip: COLUMBUS, OH 43220

Title: D ( ) Delete  
Name: BRADLEY, GEORGE  
Address: 2810 OCEAN SHORE BLVD #10  
City-St-Zip: ORMOND BEACH, FL 32176

Title: P ( ) Delete  
Name: TALLON, WALTER  
Address: 2810 OCEAN SHORE BLVD #16  
City-St-Zip: ORMOND BEACH, FL 32176

Title: D ( ) Delete  
Name: PULIZZI, HENRY  
Address: 11814 COLDSTREAM DR  
City-St-Zip: POTOMAC, MD 20854

Title: D ( ) Delete  
Name: GOODWIN, FRED  
Address: 2810 OCEAN SHORE BLVD #1  
City-St-Zip: ORMOND BEACH, FL 32176

## 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: P (X) Change ( ) Addition  
Name: EXTER, JAMES P  
Address: 752 BEAR CREEK CIRCLE  
City-St-Zip: WINTER SPRINGS, FL 32708

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

SIGNATURE: SUSAN GLAD

AGNT

04/18/2009

Electronic Signature of Signing Officer or Director

Date