

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727327

FILED
Mar 11, 2009
Secretary of State

Entity Name: MAGNOLIA LODGE ESTATES - A CONDOMINIUM, INC.

Current Principal Place of Business:

30 SOUTHEAST KINGS BAY DRIVE,
P.O. BOX 181
CRYSTAL RIVER, FL 34429

New Principal Place of Business:

30 SOUTHEAST KINGS BAY DRIVE,
APT. 101B
CRYSTAL RIVER, FL 34429

Current Mailing Address:

30 SOUTHEAST KINGS BAY DRIVE
P O BOX 1801
CRYSTAL RIVER, FL 34423 US

New Mailing Address:

FEI Number: 59-1705377 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, ROBERT D
30 SE. KINGS BAY DRIVE APT 101 B
CRYSTAL RIVER, FL 34429 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: PD () Delete
Name: RICHARDS, GARY
Address: 1221 E UNIVERSITY AVE
City-St-Zip: GAINESVILLE, FL 32641

Title: VD () Delete
Name: LESLIE, BRIAN
Address: 1909 SW 108 ST
City-St-Zip: GAINESVILLE, FL 32607

Title: TD () Delete
Name: SMITH, ROBERT D
Address: 305 E KINGS BAY DR, APT, 101B
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: D () Delete
Name: CUMMINGS, PEGGY
Address: 4245 SE 110TH ST
City-St-Zip: BELLEVUE, FL 34420

Title: D () Delete
Name: HICKS, TOMMY
Address: 5501 SW 35TH WAY
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LESLIE, BRIAN PD
Address: 1909 SW 108ST
City-St-Zip: GAINESVILLE, FL 32607

Title: D (X) Change () Addition
Name: WHITED, ROD D
Address: 2344 SW 95TH TERRACE
City-St-Zip: GAINESVILLE, FL 32607

Title: TD (X) Change () Addition
Name: SMITH, ROBERT D TD
Address: 305 E KINGS BAY DR, APT, 101B
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: D (X) Change () Addition
Name: CUMMINGS, PEGGY SECD
Address: 4245 SE 110TH ST
City-St-Zip: BELLEVUE, FL 34420

Title: VPD (X) Change () Addition
Name: HICKS, TOMMY VPD
Address: 5501 SW 35TH WAY
City-St-Zip: GAINESVILLE, FL 32608

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: ROBERT D. SMITH

TD

03/11/2009

Electronic Signature of Signing Officer or Director

_____ Date