

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 727327

**FILED**  
**Jan 13, 2010**  
**Secretary of State**

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

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**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:**

CUMMINGS, PEGGY  
4245 SE 110TH STREET  
BELLEVIEW, FL 34420 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  
Name: LESLIE, BRIAN PD  
Address: 1909 SW 108ST  
City-St-Zip: GAINESVILLE, FL 32607

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

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

Title: D  
Name: CUMMINGS, PEGGY SECD  
Address: 4245 SE 110TH ST  
City-St-Zip: BELLEVIEW, FL 34420

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

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: ROBERT D. SMITH

TREA

01/13/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date