

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729371

FILED
Jan 25, 2009
Secretary of State

Entity Name: MIDDLEBURG ATHLETIC ASSOCIATION, INC.

Current Principal Place of Business:

4317 CR 218
MIDDLEBURG, FL 32068 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 305
MIDDLEBURG, FL 32050 US

New Mailing Address:

FEI Number: 59-2925180

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

AVEDISIAN, CHRISTY
2270 TREASURE POINT
GREEN COVE SPRINGS, FL 32043 US

Name and Address of New Registered Agent:

DUNCAN, JAN
2878 WARRIOR DR
MIDDLEBURG, FL 32068 US

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: JAN DUNCAN

01/25/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LECLAIR, LARRY
Address: 4687 CATTAIL STREET
City-St-Zip: MIDDLEBURG, FL 32068

Title: VP () Delete
Name: AVEDISIAN, DONALD
Address: 2270 TREASURE POINT
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: T () Delete
Name: AVEDISIAN, CHRISTY
Address: 2270 TREASURE POINT RD.
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: S () Delete
Name: BROWN, TRACY
Address: 4683 HEDGEHOG
City-St-Zip: MIDDLEBURG, FL 32068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: COSTELLO, JOE
Address: 2575 CREEKFRONT DR
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: T (X) Change () Addition
Name: DUNCAN, JAN
Address: 2878 WARRIOR DR
City-St-Zip: MIDDLEBURG, FL 32068

Title: S (X) Change () Addition
Name: ALVERS, JOY
Address: 2234 EAGLES HAMMOCK BLVD
City-St-Zip: MIDDLEBURG, FL 32068

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: LARRY LECLAIR

P

01/25/2009

Electronic Signature of Signing Officer or Director

Date