

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732057

FILED
Apr 24, 2009
Secretary of State

Entity Name: THE MANGROVES ASSOCIATION, INC.

Current Principal Place of Business:

1218 SEA PLUME WAY
SARASOTA, FL 34242

New Principal Place of Business:

Current Mailing Address:

1218 SEA PLUME WAY
SARASOTA, FL 34242

New Mailing Address:

FEI Number: 59-2418801

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, ROBERT
227 NOKOMIS AVE S
P OBOX 1767
VENICE, FL 34284 US

Name and Address of New Registered Agent:

MOORE, ROBERT
227 NOKOMIS AVE S
VENICE, FL 34284 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:

04/24/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KNUSE, JACK
Address: 1245 SEA PLUME WAY
City-St-Zip: SARASOTA, FL 34242

Title: P () Delete
Name: TOLBERT, CARL
Address: 1225 SEA PLUME WAY
City-St-Zip: SARASOTA, FL 34242

Title: T () Delete
Name: DUINK, SCOTT
Address: 1218 SEA PLUME WAY
City-St-Zip: SARASOTA, FL 34242

Title: V () Delete
Name: GROVE, MARY
Address: 1237 SEA PLUME WAY
City-St-Zip: SARASOTA, FL 34242

Title: S () Delete
Name: DERR, OFELIA
Address: 1222 SEA PLUME WAY
City-St-Zip: SARASOTA, FL 34242

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: V (X) Change () Addition
Name: SUTTON, GINGER
Address: 1206 SEA PLUME WAY
City-St-Zip: SARASOTA, FL 34242

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: SCOTT DUINK

T

04/24/2009

Electronic Signature of Signing Officer or Director

Date