


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2008 08:00 A
Secretary of State

DOCUMENT # 741446 1. Entity Name MUNSON AREA PRESERVATION, INC.	
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Principal Place of Business 1312 CARSON DRIVE TALLAHASSEE, FL 32305	Mailing Address 1312 CARSON DRIVE TALLAHASSEE, FL 32305
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DO NOT WRITE IN THIS SPACE



04142008 No Chg-NP CR2E037 (4/08)

4. FEI Number 59-2367772	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**FOGG, MARGARET L
1312 CARSON DRIVE
TALLAHASSEE, FL 32305**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when rechartering) DATE _____

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	000000911132 05/07/08-80026-024 61.25
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD FOGG, MARGARET L 1312 CARSON DRIVE TALLAHASSEE, FL 32305
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V EVERINGTON, JAMES 5405 TRINIDAD TALLAHASSEE, FL 32305
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD BROWN, JESSIE L. 1717 OLD BRIAR TRAIL TALLAHASSEE, FL 32305
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD HODGES, ROBERT 5705 LEFRANCE CR TALLAHASSEE, FL 32305
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jessie L Brown Jessie L. Brown 877-5380
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
4-16-08