2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2009
Secretary of State

DOCUMENT# 741446

Entity Name: MUNSON AREA PRESERVATION, INC.

Current Principal Place of Business:

1312 CARSON DRIVE
TALLAHASSEE, FL 32305

New Principal Place of Business:

Current Mailing Address:

1312 CARSON DRIVE
TALLAHASSEE, FL 32305

New Mailing Address:

FEI Number: 59-2367772 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

FOGG, MARGARET L
1312 CARSON DRIVE
TALLAHASSEE, FL 32305 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: FOGG, MARGARET L
Address: 1312 CARSON DRIVE
City-St-Zip: TALLAHASSEE, FL 32305

Title: V ( ) Delete
Name: EVERINGTON, JAMES
Address: 5405 TRINIDAD
City-St-Zip: TALLAHASSEE, FL 32305

Title: STD ( ) Delete
Name: BROWN, JESSIE L.
Address: 1717 OLD BRIAR TRAIL
City-St-Zip: TALLAHASSEE, FL 32305

Title: VD ( ) Delete
Name: HODGES, ROBERT
Address: 5705 LEFRANCE CR
City-St-Zip: TALLAHASSEE, FL 32305

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: ( ) 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: JESSIE L. BROWN STD 05/04/2009
Electronic Signature of Signing Officer or Director — Date