

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743607

FILED
Apr 10, 2009
Secretary of State

Entity Name: MAYFAIR VILLAS ASSOCIATION, INC.

Current Principal Place of Business:

3800 H. E. THOMAS, JR. PARKWAY
SANFORD, FL 32771

New Principal Place of Business:

Current Mailing Address:

120 MAYFAIR CT
SANFORD, FL 32771

New Mailing Address:

FEI Number: 59-1897775

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWANN, PATTY J
120 MAYFAIR CT
SANFORD, FL 32771 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: PRES () Delete
Name: INGRAM, BILL
Address: 144 MAYFAIR COURT
City-St-Zip: SANFORD, FL 32771

Title: DIR. () Delete
Name: JOHNSON, TOMMYE
Address: 138 MAYFAIR COURT
City-St-Zip: SANFORD, FL 32771

Title: DIR. () Delete
Name: STEVENS, DON
Address: 110 MAYFAIR COURT
City-St-Zip: SANFORD, FL 32771

Title: DIR. () Delete
Name: MOSSMAN, LIBBY
Address: 154 MAYFAIR COURT
City-St-Zip: SANFORD, FL 32771

Title: SEC. () Delete
Name: ANDERSON, JIM
Address: 124 MAYFAIR CT
City-St-Zip: SANFORD, FL 32771

Title: DIR. () Delete
Name: LENDERS, ROBERT J
Address: 101 MAYFAIR CT
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V. P (X) Change () Addition
Name: JOHNSON, TOMMYE
Address: 138 MAYFAIR COURT
City-St-Zip: SANFORD, FL 32771

Title: DIR. (X) Change () Addition
Name: COLLINS, MARILYN
Address: 102 MAYFAIR COURT
City-St-Zip: SANFORD, FL 32771

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: ROBERT J. LENDERS

DIR

04/10/2009

Electronic Signature of Signing Officer or Director

Date