## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 754212** 

FILED Feb 17, 2010 Secretary of State

Entity Name: MONTGOMERY SQUARE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

232 WILSHIRE BLVD CASSSELBERRY, FL 32707

Current Mailing Address: New Mailing Address:

232 WILSHIRE BLVD CASSSELBERRY, FL 32707

FEI Number: 59-2026142 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BARBER, FRANK P
232 WILSHIRE BLVD
2180 W SR 434 SUITE 5000
CASSELBERRY, FL 32707 US
CASSELBERRY, FL 32707 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: 02/17/2010

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Γitle: PRES

Name: KEEVAN, WILLIAM Address: 523 EATON DR

City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VP

Name: SACKETT, JUDITH

Address: 421 MONTGOMERY ROAD #175 City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: TR

Name: METCALF, BARRY
Address: 1834 BISCAYNE DR
City-St-Zip: ORLANDO, FL 32804

Title: DIR

Name: MADSON, PETER G Address: 509 DERBY DR

City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: SEC

Name: HOENIGMAN, SANDRA L Address: 527 MANSFIELD DR

City-St-Zip: ALTAMONTE SPRINGS, FL 32714

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM KEEVAN PRES 02/17/2010