

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 22, 2007 8:00 am
Secretary of State

05-22-2007 90018 015 ****61.25

DOCUMENT # 756954

1. Entity Name

MATLACHA CIVIC ASSOCIATION, INC.



Principal Place of Business

P. O. BOX 521
MATLACHA PARK MATLACHA FL 33993
US

Mailing Address

P. O. BOX 521
MATLACHA PARK MATLACHA FL 33993
US



1st MOORE CR2E037 (10/06)

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0099853

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DENSLEY, L. KENT
12123 MOON SHELL DRIVE
MATLACHA ISLES FL 33991

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 date if applicable.

(NOTE: Registered Agent signature required when registering)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P WALKER, GARY P.O. BOX 334 PINELAND FL 33945	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V MCKNIGHT, ROBERT 12210 MATLACHA AVE MATLACHA FL 33993	☒ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S KETIRE, MELADY P.O. BOX 364 MATLACHA FL 33991	☒ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T DENSLEY, L. KENT 12123 MOON SHELL DR. MATLACHA ISLES FL 33991	☒ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY - ST - ZIP	Bill Stoelken PO Box 126 MATLACHA FL 33993	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Mike Gordon PO Box 694 MATLACHA FL 33993	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Melady Retire PO Box 334 MATLACHA FL 33993	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Robert 1220 MATLACHA AVE	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Walker, Gary PO Box 334 Pineland FL 33945	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5-13-07 2398500930

GARY S. WALKER