

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2007 8:00 am
Secretary of State

03-12-2007 90372 008 ****61.25

DOCUMENT # 761124 1. Entity Name MAPLE LEAF ESTATES OWNERS ASSOCIATION, INC.					
Principal Place of Business 596 MAPLE LEAF DR PENSACOLA, FL 32514				Mailing Address 596 MAPLE LEAF DR PENSACOLA, FL 32514	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	02082007 Chg-NP CR2E037 (12/06)	
4. FEI Number 59-2237139				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SPENCE, ELIZABETH 549 MAPLE LEAF DR PENSACOLA, FL 32514			7. Name and Address of New Registered Agent Name WILLIAM VAN TILBURG Street Address (P.O. Box Number is Not Acceptable) 9630 MAPLELEAF DRIVE City PENSACOLA FL Zip Code 32514		
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 <u>William Van Tilburg</u> Signature, typed or printed name of registered agent and title if applicable.			DATE 3-5-07 (NOTE: Registered Agent signature required when reconstituting)		
Filing Fee is \$81.25 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C SPENCE, ELIZABETH 596 MAPLE LEAF CIR PENSACOLA, FL 32514	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	C WILLIAM VAN TILBURG 9630 MAPLELEAF DRIVE PENSACOLA FL. 32514	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC PEAKE, DALE 478 MAPLE LEAF CIR PENSACOLA, FL 32514	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC BOBBY POSEY 413 MAPLELEAF CIRCLE PENSACOLA FL. 32514	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARPE, HAZEL 9621 MAPLE LEAF DR PENSACOLA, FL 32514	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	RC JOANNE FAIRCLOTH 421 MAPLELEAF CIRCLE PENSACOLA FL. 32514	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BERG, VANESSA 408 MAPLE LEAF LN PENSACOLA, FL 32514	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. JAMES R. RODGERS 593 MAPLELEAF CIRCLE PENSACOLA FL. 32514	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WYNN, LINDA 9613 MAPLE LEAF DR PENSACOLA, FL 32514	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. BARBARA ROPER 9625 MAPLELEAF LANE PENSACOLA FL. 32514	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OSWALD, PAT 533 MAPLELEAF CIR PENSACOLA, FL 32514	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. JOE COLLIER 9613 MAPLELEAF LANE PENSACOLA FL. 32514	☒ Change ☐ Addition
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: <u>William Van Tilburg</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date 3-5-07 Daytime Phone # 450 473-9316		

SEE PAGE (2)

PAGE (2)
ANNUAL Report

ATTACHMENT
40034369

- T. - Mary Jane Engle.
426 mapleleaf circle
Pensacola FL. 32514
- D. - Doris Bayless
427 mapleleaf circle
Pensacola FL. 32514
- D. - Loretta VAN Tilburg.
9630 - mapleleaf circle
Pensacola FL. 32514
- D. - CAROL Farrell
9633 mapleleaf lane
Pensacola FL. 32514