2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2009
Secretary of State

DOCUMENT# 765416

Entity Name: MUIRFIELD HEATH HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2004 LONGMEADOW
SARASOTA, FL 34235

New Principal Place of Business:

Current Mailing Address:

2004 LONGMEADOW
SARASOTA, FL 34235

New Mailing Address:

FEI Number: 59-2227160 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOEGEL, WILLIAM J
3014 ROSEMEAD
SARASOTA, FL 34235 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:	P	( ) Delete
Name:	HOEGEL, WILLIAM J	
Address:	3014 ROSEMEAD	
City-St-Zip:	SARASOTA, FL 34235	
Title:	D	( ) Delete
Name:	BEATTIE, ROBERT	
Address:	3148 HEATHERWOOD LANE	
City-St-Zip:	SARASOTA, FL 34235	
Title:	TO	( ) Delete
Name:	FORD, MICHAEL	
Address:	3028 ROSEMEAD	
City-St-Zip:	SARASOTA, FL 34235	
Title:	V	( ) Delete
Name:	FROMM, CLIFFORD	
Address:	3028 ROSEMEAD	
City-St-Zip:	SARASOTA, FL 34235	
Title:	D	( ) Delete
Name:	MARDEN, MARY	
Address:	2961 HEATHER BOW	
City-St-Zip:	SARASOTA, FL 34235	
Title:	D	( ) Delete
Name:	LEDGER, MARILYN	
Address:	3017 ROSE MEAD	
City-St-Zip:	SARASOTA, FL 34235	

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:	
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: WILLIAM J. HOEGEL P 04/07/2009

Electronic Signature of Signing Officer or Director — Date