

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765957

FILED
Apr 15, 2009
Secretary of State

Entity Name: MAYPORT LANDING OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

920 THIRD ST
SUITE C
NEPTUNE BEACH, FL 32266 US

Current Mailing Address:

920 THIRD ST
SUITE C
NEPTUNE BEACH, FL 32266 US

New Principal Place of Business:

1112 THIRD ST
SUITE 5
NEPTUNE BEACH, FL 32266 US

New Mailing Address:

1112 THIRD ST
SUITE 5
NEPTUNE BEACH, FL 32266 US

FEI Number: 59-2317072

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARKS, FRANCES C
920 THIRD ST
SUITE C
NEPTUNE BEACH, FL 32266 US

Name and Address of New Registered Agent:

PARKS, FRANCES C
1112 THIRD ST
SUITE 5
NEPTUNE BEACH, FL 32266 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:

04/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MCGOVERN, JOHN J
Address: P.O. BOX 49118
City-St-Zip: JACKSONVILLE BEACH, FL 32240

Title: VP () Delete
Name: BECKERLEY, WILLIAM
Address: 13986 SHIPWRECK CIRCLE S
City-St-Zip: JACKSONVILLE, FL 32224

Title: S () Delete
Name: HAMM, MARTIN
Address: 108 OCEAN EDGE DRIVE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: T () Delete
Name: STREMMEL, KEVIN
Address: 9570 REGENCY SQUARE BLVD
City-St-Zip: JACKSONVILLE, FL 32225

Title: D () Delete
Name: MCCORMICK, PATRICK
Address: 1620 EVANS DRIVE
City-St-Zip: JACKSONVILLE BEACH, FL 32250

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: MCGOVERN, JOHN J
Address: P.O. BOX 49118
City-St-Zip: JACKSONVILLE BEACH, FL 32240

Title: P (X) Change () Addition
Name: BECKERLEY, WILLIAM H
Address: 13986 SHIPWRECK CIRCLE S
City-St-Zip: JACKSONVILLE, FL 32224

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

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

Title: D (X) Change () Addition
Name: JUDD, SHARON
Address: 2535 COACHMAN LAKES DRIVE
City-St-Zip: JACKSONVILLE, FL 32246

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 H. BECKERLEG III

PRES

04/15/2009

Electronic Signature of Signing Officer or Director

Date