

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768299

FILED
Apr 15, 2009
Secretary of State

Entity Name: MIDDLEBROOK PINES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5255 CYPRESS CT
ORLANDO, FL 32811 US

New Principal Place of Business:

Current Mailing Address:

1360 N GOLDENROD RD
SUITE 12F
ORLANDO, FL 32807 US

New Mailing Address:

1360 N GOLDENROD RD
SUITE 12
ORLANDO, FL 32807 US

FEI Number: 59-2586042

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIEBZAK, KEITH R
C/O KL MANAGEMENT GROUP INC
1360 N. GOLDENROD RD 12
ORLANDO, FL 32807 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: D () Delete
Name: NEILSON, JOHN
Address: 5255 CYPRESS CT
City-St-Zip: ORLANDO, FL 32811

Title: PD () Delete
Name: BUSSINGER, RUBY
Address: 5255 CYPRESS CT
City-St-Zip: ORLANDO, FL 32811

Title: STD () Delete
Name: STEINHARDT, JOYCE
Address: 5255 CYPRESS CT
City-St-Zip: ORLANDO, FL 32811

Title: VD () Delete
Name: ALIVENTO, ANTHONY
Address: 5255 CYPRESS CT
City-St-Zip: ORLANDO, FL 32811

Title: D () Delete
Name: CARDNER, BRUCE
Address: 5255 CYPRESS CT
City-St-Zip: ORLANDO, FL 32811

Title: D (X) Delete
Name: MIKULA, MIKE
Address: 5255 CYPRESS CT
City-St-Zip: ORLANDO, FL 32811

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WARD, MARLENE
Address: 5255 CYPRESS CT
City-St-Zip: ORLANDO, FL 32811

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: D (X) Change () Addition
Name: LOVELY, DAVID
Address: 5255 CYPRESS CT
City-St-Zip: ORLANDO, FL 32811

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: KEITH R. KIEBZAK

RA

04/15/2009

Electronic Signature of Signing Officer or Director

Date