

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 770590

**FILED**  
**Jan 20, 2011**  
**Secretary of State**

**Entity Name:** MELROSE AREA PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

235 MELROSE LANDING BLVD  
HAWTHORNE, FL 32640

**New Principal Place of Business:**

126 MELROSE LANDING DRIVE  
HAWTHORNE, FL 32640

**Current Mailing Address:**

235 MELROSE LANDING BLVD  
HAWTHORNE, FL 32640 US

**New Mailing Address:**

126 MELROSE LANDING DRIVE  
HAWTHORNE, FL 32640 US

**FEI Number:** 59-2381211

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

OSTROWSKI, CONSTANCE  
340 MELROSE LANDING BLVD.  
HAWTHORNE, FL 32640 US

**Name and Address of New Registered Agent:**

ATKINSON, PETER  
282 WHIRLWIND LOOP  
HAWTHORNE, FL 32640 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: PETER ATKINSON

01/20/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: BRYANT, SHANE  
Address: 110 DEW DROP WAY  
City-St-Zip: HAWTHORNE, FL 32640

Title: SD  
Name: ATKINSON, PETER  
Address: 282 WHIRLWIND LOOP  
City-St-Zip: HAWTHORNE, FL 32640

Title: TD  
Name: OSTROWSKI, CONSTANCE  
Address: 340 MELROSE LANDING BLVD.  
City-St-Zip: HAWTHORNE, FL 32640

I hereby 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 all other like empowered.

SIGNATURE: PETER ATKINSON

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01/20/2011

Electronic Signature of Signing Officer or Director

Date