

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000386

FILED  
Apr 19, 2011  
Secretary of State

**Entity Name:** MALLARD'S LANDING VILLAGE ASSOCIATION, INC.

**Current Principal Place of Business:**

5067 TAMIAMI TRAIL E  
NAPLES, FL 34113 US

**New Principal Place of Business:**

4670 CARDINAL WAY #302  
NAPLES, FL 34112 US

**Current Mailing Address:**

5067 TAMIAMI TRAIL E  
NAPLES, FL 34113 US

**New Mailing Address:**

4670 CARDINAL WAY #302  
NAPLES, FL 34112 US

**FEI Number:** 59-3623530

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

CARDINAL MANAGEMENT GROUP  
5067 TAMIAMI TRAIL E  
NAPLES, FL 34103 US

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

CARDINAL MANAGEMENT GROUP OF FLORIDA, INC.  
4670 CARDINAL WAY  
SUITE 302  
NAPLES, FL 34112 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:** CARDINAL MANAGEMENT GROUP OF FLORIDA, INC.

04/19/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** WHITEHEAD, LINDA  
**Address:** 8466 MALLARDS WAY  
**City-St-Zip:** NAPLES, FL 34114

**Title:** D  
**Name:** JOHNSTON, DICK  
**Address:** 8417 MALLARD'S WAY  
**City-St-Zip:** NAPLES, FL 34114

**Title:** S  
**Name:** CARSWELL, PEGGY  
**Address:** 8476 MALLARDS WAY  
**City-St-Zip:** NAPLES, FL 34114

**Title:** T  
**Name:** MERLING, MYLES  
**Address:** 8465 MALLARDS WAY  
**City-St-Zip:** NAPLES, FL 34114

**Title:** VP  
**Name:** SNAPE, ED  
**Address:** 8426 MALLARDS WAY  
**City-St-Zip:** NAPLES, FL 34114

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:** LINDA WHITEHEAD

PRES

04/19/2011

Electronic Signature of Signing Officer or Director

Date