

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004284

FILED
Jun 18, 2009
Secretary of State

Entity Name: MCH PROPERTY ASSOCIATION, INC.

Current Principal Place of Business:

870 CIDCO ROAD
COCOA, FL 32926

New Principal Place of Business:

Current Mailing Address:

PO BOX 237025
COCOA, FL 32923

New Mailing Address:

FEI Number: 59-3738083 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MENYHART, ANDREW W
160 MCLEOD STREET
MERRITT ISLAND, FL 32953 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: PD () Delete
Name: COXWELL, DALE
Address: 870 CIDCO ROAD
City-St-Zip: COCOA, FL 32926

Title: CEOD () Delete
Name: MALLARD, ARNOLD
Address: 2955 LAKE DRIVE
City-St-Zip: COCOA, FL 32926

Title: D () Delete
Name: COXWELL, PHILLIP
Address: 870 CIDCO ROAD
City-St-Zip: COCOA, FL 32926

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:

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: DALE P. COXWELL

PD

06/18/2009

Electronic Signature of Signing Officer or Director

Date