

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002246

FILED  
Feb 18, 2010  
Secretary of State

**Entity Name:** Mandalay Beach Club Owner's Association, Inc.

**Current Principal Place of Business:**

10 PAPAYA STREET  
CLEARWATER, FL 33767

**New Principal Place of Business:**

**Current Mailing Address:**

10 PAPAYA STREET  
CLEARWATER, FL 33767

**New Mailing Address:**

**FEI Number:** 03-0383797

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MEZER, STEVEN H  
BUSH ROSS GARDENER WARREN & RUDY OA  
220 SOUTH FRANKLIN STREET  
TAMPA, FL FL33602 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: PRES  
Name: HULLING, DON  
Address: 4151 WOODLANDS PARKWAY  
City-St-Zip: PALM HARBOR, FL 34685

Title: VP  
Name: BIENSTOCK, JOSEPH  
Address: 4151 WOODLANDS PARKWAY  
City-St-Zip: PALM HARBOR, FL 34685

Title: SEC  
Name: ZILISCH, BARBARA  
Address: 4151 WOODLANDS PARKWAY  
City-St-Zip: PALM HARBOR, FL 34685

Title: TREA  
Name: MENKE, DENISE  
Address: 4151 WOODLANDS PARKWAY  
City-St-Zip: PALM HARBOR, FL 34685

Title: D  
Name: KLEINBERG, MILTON  
Address: 4151 WOODLANDS PARKWAY  
City-St-Zip: PALM HARBOR, FL 34685

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: DON HULLING

PRES

02/18/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date