2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2010
Secretary of State

DOCUMENT# N01000004433

Entity Name: MALLARD POINTE HOMEOWNERS ASSOCIATION OF POLK COUNTY, INC.

Current Principal Place of Business:

C/O STRAUGH, TURNER, & SMITH
255 MAGNOLIA AVE SW
WINTER HAVEN, FL 33880

New Principal Place of Business:

Current Mailing Address:

PO BOX 7404
WINTER HAVEN, FL 33883

New Mailing Address:

FEI Number: 90-0015446 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STRAUGHN, RICHARD E ESQ
255 MAGNOLIA AVE SW
WINTER HAVEN, FL 33880 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: P
Name: BASON, GREG
Address: PO BOX 7404
City-St-Zip: WINTER HAVEN, FL 33883

Title: VP
Name: BADER, JOHN
Address: PO BOX 7404
City-St-Zip: WINTER HAVEN, FL 33883

Title: TRES
Name: DANTZLER, BRADLEY
Address: PO BOX 7404
City-St-Zip: WINTER HAVEN, FL 33883

Title: D
Name: BEALE, DAN
Address: PO BOX 7404
City-St-Zip: WINTER HAVEN, FL 33883

Title: D
Name: DURDEN, J. WAYNE
Address: PO BOX 7404
City-St-Zip: WINTER HAVEN, FL 33883

Title: SEC
Name: BEALE, ANDREA
Address: PO BOX 7404
City-St-Zip: WINTER HAVEN, FL 33883

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: JAMES ALLEN PROPERTY MANAGER MGR 01/07/2010

Electronic Signature of Signing Officer or Director — Date