## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01635

FILED Feb 12, 2009 Secretary of State

Entity Name: MURRELL VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O GJ REAL ESTATE INC
200 WILLARD STREET, #2-B
COCOA VILLAGE, FL 32922

C/O GJ REAL ESTATE INC
200 WILLARD STREET, #2-B
COCOA, FL 32922

Current Mailing Address: New Mailing Address:

C/O GJ REAL ESTATE INC
200 WILLARD STREET, #2-B
COCOA VILLAGE, FL 32922

C/O GJ REAL ESTATE INC
200 WILLARD STREET, #2-B
COCOA, FL 32922

FEI Number: 59-2367515 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

WEAN & MALCHOW, P.A. 646 EAST COLONIAL DRIVE ORLANDO, FL 32803 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:

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 YOUNG, ROBERT
 Name:
 YOUNG, ROBERT

 Address:
 55 ROADSIDE DRIVE, #103
 Address:
 55 RIVERSIDE DRIVE, #103

 City-St-Zip:
 COCOA, FL 329227863
 City-St-Zip:
 COCOA, FL 329227863

Title: ST () Delete Title: () Change () Addition

 Name:
 FRANZ, JOHN
 Name:

 Address:
 487 NANCIE AVENUE
 Address:

 City-St-Zip:
 MERRITT ISLAND, FL 32953
 City-St-Zip:

 $\label{eq:title:P} {\sf Title:} \qquad {\sf P} \qquad (\ ) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf P} \qquad ({\sf X}) \, {\sf Change} \, (\ ) \, {\sf Addition}$ 

Name: HOCK, TIM Name: HOCK, TIM

Address: 1008 DOWITCHEW COURT Address: 1008 DOWITCHER COURT City-St-Zip: ROCKLEDGE, FL 32955 City-St-Zip: ROCKLEDGE, FL 32955

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: TIM HOCK P 02/12/2009