

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004158

FILED
May 04, 2010
Secretary of State

Entity Name: MAGNOLIA RIDGE ESTATES PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

83B HIGHWAY 98
EASTPOINT, FL 32328

New Principal Place of Business:

Current Mailing Address:

PO BOX 705
EASTPOINT, FL 32328

New Mailing Address:

FEI Number: 45-0514780 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

Name and Address of New Registered Agent:

HARTMAN, DANIEL W
207 WEST PARK AVENUE, SUITE A
TALLAHASSEE, FL 32301 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:

Title: VSD
Name: CRUM, JAMIE D
Address: 83 B HWY 98
City-St-Zip: EASTPOINT, FL 32328

Title: D
Name: MEDEIROS, JOHN
Address: 144 SHADOW BAY DRIVE
City-St-Zip: EASTPOINT, FL 32328

Title: S/TR
Name: RUDZINSKI, BRANDT
Address: PO BOX 705
City-St-Zip: EASTPOINT, FL 32328

Title: P
Name: COX, WINFRED
Address: PO BOX 402
City-St-Zip: PIKEVILLE, TN 37367

Title: D
Name: CHAMPION, RANDALL
Address: 137 SHADOW BAY DR
City-St-Zip: EASTPOINT, FL 32328

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: JAMIE CRUM

MBRM

05/04/2010

Electronic Signature of Signing Officer or Director

Date