## 2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N02888

FILED Oct 18, 2009 Secretary of State

Entity Name: MAGDALENE COURT CONDOMINIUM ASSOCIATION, INC.

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

7001 TEMPLE TERRACE HWY 104 E FOWLER ST TEMPLE TERRACE, FL 33637 US

SUITE 190 TAMPA, FL 33612 US

**Current Mailing Address:** New Mailing Address:

7001 TEMPLE TERRACE HWY PO BOX 10217

TEMPLE TERRACE, FL 33637 US TAMPA, FL 33679 US

FEI Number: 59-2403562 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:

WESTERMAN, MARIELLE E ESQ. WESTERMAN WHITE, P.A. 146 2ND STREET NORTH, SUITE 208 ST. PETERSBURG, FL 33701 US

**OFFICERS AND DIRECTORS:** 

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:

Date

## Electronic Signature of Registered Agent

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete

SIMPSON, JACK SIMPSON, JACK Name: Name: 13620 LAKE MAGDALENE BLVD #205 Address: PO BOX 10217 Address:

City-St-Zip: TAMPA, FL 33618 City-St-Zip: TAMPA, FL 33679

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

KIRACOFE, PATRICIA Name: KIRACOFE, PATRICIA Name: Address: 13620 LAKE MAGDALENE BLVD #606 Address: PO BOX 10217 City-St-Zip: TAMPA, FL 33618 City-St-Zip: TAMPA, FL 33679

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

GARVEY, REGINA GARVEY, REGINA Name: Name: 13620 LAKE MAGDALENE CT STE 304 Address: Address: PO BOX 10217 City-St-Zip: TAMPA, FL 33618 City-St-Zip: TAMPA, FL 33679

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

Name: SARR, KATY Name: BARR, KATY Address: 13620 LAKE MAGDALENE CT STE 309 Address: PO BOX 10217 City-St-Zip: TAMPA, FL 33618 City-St-Zip: TAMPA, FL 33679

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

BURKE, JERRY BURKE, JERRY Name: Name: 13620 LAKE MAGDALENE CT STE 21 PO BOX 10217 Address: Address: City-St-Zip: TAMPA, FL 33618 City-St-Zip: TAMPA, FL 33679

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: JACK SIMPSON **PRES** 10/18/2009