2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2009
Secretary of State

DOCUMENT# N03000000044

Entity Name: MAGNOLIA POINT PRESERVE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O 24/7 PROPERTY MANAGEMENT, LLC
21148 LOS CABOS COURT
LAND O' LAKES, FL 34637

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 2451
LAND O' LAKES, FL 34639

New Mailing Address:

FEI Number: 20-0580820 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C/O 24/7 PROPERTY MANAGEMENT, LLC
21148 LOS CABOS COURT
LAND O'LAKES, FL 34637 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 ( ) Delete
Name: NELSON, BILL
Address: 4174 WOODLANDS PARKWAY
City-St-Zip: PALM HARBOR, FL 34685

Title: TREA ( ) Delete
Name: LARKINS, BOB
Address: 4174 WOODLANDS PARKWAY
City-St-Zip: PALM HARBOR, FL 34685

Title: SEC ( ) Delete
Name: PAULIS, JACK
Address: 4174 WOODLANDS PARKWAY
City-St-Zip: PALM HARBOR, FL 34685

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change ( ) Addition
Name: NELSON, BILL
Address: 16 PARHAM DRIVE
City-St-Zip: PENFIELD, NY 14526

Title: DP (X) Change ( ) Addition
Name: GRAHAM, KENNETH
Address: 6504 VANDA LANE
City-St-Zip: LAND O LAKES, FL 34637

Title: DS (X) Change ( ) Addition
Name: LEUSCHNER, CURT
Address: 6505 VANDA LANE
City-St-Zip: LAND O LAKES, FL 34637

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: DANIEL NEMETH CAM 02/18/2009

Electronic Signature of Signing Officer or Director — Date