

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003523

FILED
Feb 04, 2009
Secretary of State

Entity Name: THE MOORINGS I HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

620 BAYWAY BLVD.
#6
CLEARWATER BEACH, FL 33767

New Principal Place of Business:

620 BAYWAY BLVD.
CLEARWATER BEACH, FL 33767

Current Mailing Address:

P.O. BOX 3455
CLEARWATER BEACH, FL 33767

New Mailing Address:

15561 REDINGTONDR.
REDINGTON BEACH, FL 33708

FEI Number: 90-0259849

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MC GEE, MICHELLE A
620 BAYWAY BLVD.
#6
CLEARWATER BEACH, FL 33767 US

Name and Address of New Registered Agent:

REAVES, DENISE N
15561 REDINGTON DR.
REDINGTON BEACH, FL 33708 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: DENISE REAVES

02/04/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P/T () Delete
Name: MC GEE, MICHELLE A
Address: P.O. BOX 3455
City-St-Zip: CLEARWATER BEACH, FL 33767 US

Title: VPS () Delete
Name: MC GEE, JOHN P
Address: PO BOX 3455
City-St-Zip: CLEARWATER BEACH, FL 33767

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: ROEDER, RICHARD
Address: 1055 TRAILSEND RD.
City-St-Zip: PASADENA, MD 21122 US

Title: VP (X) Change () Addition
Name: REAVES, DENISE
Address: 15561 REDINGTON DR.
City-St-Zip: REDINGTON BEACH, FL 33708

Title: TREA () Change (X) Addition
Name: HIGGER, STEVEN
Address: 206 TOWER DR.
City-St-Zip: OLDSMAR, FL 34677

Title: SEC () Change (X) Addition
Name: BARNA, JAMES S
Address: 916 CYPRESS LAKE BLVD.
City-St-Zip: TARPON SPRINGS, FL 34688

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: DENISE REAVES

VP

02/04/2009

Electronic Signature of Signing Officer or Director

Date