2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2004
Secretary of State

DOCUMENT# N03000010759

Entity Name: THE MAGNOLIA VILLAS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3275 SE 58TH AVE
OCALA, FL 34471

New Principal Place of Business:

1100 SE 58TH AVE
OCALA, FL 34471

Current Mailing Address:

3275 SE 58TH AVE
OCALA, FL 34471

New Mailing Address:

PO BOX 4338
OCALA, FL 34478

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MAGNOLIA PROPERTIES OF OCALA, INC.
3275 SE 58TH AVE
OCALA, FL 34471

Name and Address of New Registered Agent:

MAGNOLIA PROPERTIES OF OCALA, INC.
1100 SE 58TH AVE
OCALA, FL 34471

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: _____ 03/30/2004
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: FRENCH, JON M
Address: P O BOX 2306
City-St-Zip: BELLEVIEW, FL 34421

Title: D ( ) Delete
Name: BARFIELD, TODD
Address: P O BOX 4338
City-St-Zip: OCALA, FL 34478

Title: D ( ) Delete
Name: KAY, RANCE H
Address: P O BOX 4338
City-St-Zip: OCALA, FL 34478

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TODD L BARFIELD D 03/30/2004
Electronic Signature of Signing Officer or Director — Date