

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000712

FILED
May 01, 2008
Secretary of State

Entity Name: MASA GROUP HOMES INC.

Current Principal Place of Business:

3731 BENSON PARK BLVD
ORLANDO, FL 32829

New Principal Place of Business:

Current Mailing Address:

3731 BENSON PARK BLVD
ORLANDO, FL 32829

New Mailing Address:

FEI Number: 20-1670706 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

CRAIG, MARCIA
3731 BENSON PARK BLVD
ORLANDO, FL 32829 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: P () Delete
Name: CRAIG, MARCIA
Address: 3731 BENSON PARK BLVD
City-St-Zip: ORLANDO, FL 32829

Title: ADM () Delete
Name: WILLIAMS, NICOLE
Address: 329 KIRKCALDY DR
City-St-Zip: WINTER SPRINGS, FL 32708

Title: VP () Delete
Name: CRICLOW, ROBERTO
Address: 2005 CRICKET DR
City-St-Zip: ORLANDO, FL 32808

Title: TRE () Delete
Name: BRITTON, BERNADETTE
Address: 1198 VILLAGE FOREST PL
City-St-Zip: WINTER PARK, FL 32792

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:

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

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: MARCIA CRAIG

P

05/01/2008

Electronic Signature of Signing Officer or Director

Date