

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002919

**FILED**  
**Apr 16, 2010**  
**Secretary of State**

**Entity Name:** MADISON CAY TOWNHOMES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

ELBOW KEY CT./ABACO CT.  
CAPE CANAVERAL, FL 32920

**New Principal Place of Business:**

**Current Mailing Address:**

1415 N. ATLANTIC AVE  
COCOA BEACH, FL 32931

**New Mailing Address:**

FEI Number: 59-3838214

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CHINAPPI, PATRICIA  
8525 ELBOW KEY CT  
CAPE CANAVERAL, FL 32920 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: PD  
Name: CHINAPPI, PATRICIA  
Address: 8525 ELBOW KEY CT.  
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: VPD  
Name: SLAIMAN, DAVID  
Address: 8516 ABACCO CT.  
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: STD  
Name: DOS SANTOS, ANNA  
Address: 2755 NW 108 TERRACE  
City-St-Zip: FORT LAUDERDALE, FL 32953

I hereby 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 all other like empowered.

SIGNATURE: PATRICIA CHINAPPI

PRES

04/16/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date