

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004194

FILED
Jan 26, 2007
Secretary of State

Entity Name: MYAKKA HEIGHTS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O 2033 MAIN ST STE 600
SARASOTA, FL 34237

New Principal Place of Business:

Current Mailing Address:

C/O 2033 MAIN ST STE 600
SARASOTA, FL 34237

New Mailing Address:

FEI Number: 65-0773295

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MESSICK, ROBERT ESQ.
C/O 2033 MAIN ST STE 600
SARASOTA, FL 34237 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 () Delete
Name: CANNON, JOHN K
Address: 7077 S TAMiami TRAIL
City-St-Zip: SARASOTA, FL 34231

Title: SD () Delete
Name: CLEMENTS, DICKSON
Address: 7077 S TAMiami TRAIL
City-St-Zip: SARASOTA, FL 34231

Title: TD () Delete
Name: FINLEY, MICHAEL
Address: 7077 S TAMiami TRAIL
City-St-Zip: SARASOTA, FL 34231

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CANNON, JOHN K
Address: 6710 PROGESSIONAL PKWY., WEST, SUITE
City-St-Zip: SARASOTA, FL 34240

Title: SD (X) Change () Addition
Name: CLEMENTS, DICKSON
Address: 6710 PROFESSIONAL PKWY., WEST, SUITE 100
City-St-Zip: SARASOTA, FL 34240

Title: TD (X) Change () Addition
Name: FINLEY, MICHAEL
Address: 6710 PROFESSIONAL PKWY., WEST, SUITE 100
City-St-Zip: SARASOTA, FL 34240

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN K. CANNON

PD

01/26/2007

Electronic Signature of Signing Officer or Director

Date