

**2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Aug 25, 2006**  
**Secretary of State**

DOCUMENT# N05000006994

**Entity Name:** MAGNOLIA POINTE OF COCOA-HOMEOWNER'S ASSOCIATION, INC.**Current Principal Place of Business:**395 S RANGE RD  
COCOA, FL 32926**New Principal Place of Business:****Current Mailing Address:**395 S RANGE RD  
COCOA, FL 32926**New Mailing Address:****FEI Number:****FEI Number Applied For (X)****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**CARTER, DEBBIE  
395 S RANGE RD  
COCOA, FL 32926 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: DT ( ) Delete  
Name: FRANKLIN, DAVID A  
Address: 395 S RANGE RD  
City-St-Zip: COCOA, FL 32926Title: DV ( ) Delete  
Name: DEEN, CURTIS G  
Address: 395 S RANGE RD  
City-St-Zip: COCOA, FL 32926Title: DAT ( ) Delete  
Name: JACKSON, A DORA  
Address: 395 S RANGE RD  
City-St-Zip: COCOA, FL 32926Title: DAS ( ) Delete  
Name: THOMAS, JOHN  
Address: 395 S RANGE RD  
City-St-Zip: COCOA, FL 32926Title: DP ( ) Delete  
Name: OENBRINK, REGINA A  
Address: 395 S RANGE RD  
City-St-Zip: COCOA, FL 32926Title: SEC ( ) Delete  
Name: CARTER, DEBBIE  
Address: 395 S RANGE RD  
City-St-Zip: COCOA, FL 32926**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: DAT (X) Change ( ) Addition  
Name: EDDINGS, KENDRA  
Address: 395 S RANGE RD  
City-St-Zip: COCOA, FL 32926Title: ( ) 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 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: REGINA A. OENBRINK

DP

08/25/2006

Electronic Signature of Signing Officer or Director

Date