

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007970

FILED
Aug 08, 2007
Secretary of State

Entity Name: MAGNOLIA CREST PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1740 N. MAGNOLIA AVE.
OCALA, FL 34475

New Principal Place of Business:

Current Mailing Address:

1740 N. MAGNOLIA AVE.
OCALA, FL 34475

New Mailing Address:

FEI Number: 20-3757936 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

MARTELLI, GOFFREDO
1740 N. MAGNOLIA AVE.
OCALA, FL 34475 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: D () Delete
Name: MARTELLI, GOFFREDO
Address: 6561 S. MAGNOLIA AVE.
City-St-Zip: OCALA, FL 34474

Title: D () Delete
Name: MARTELLI, LEONARDO
Address: 6561 S. MAGNOLIA AVE.
City-St-Zip: OCALA, FL 34474

Title: D () Delete
Name: MARTELLI, MINA
Address: 6561 S. MAGNOLIA AVE.
City-St-Zip: OCALA, FL 34474

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MARTELLI, GOFFREDO
Address: 6561 S. MAGNOLIA AVE.
City-St-Zip: OCALA, FL 34471

Title: D (X) Change () Addition
Name: MARTELLI, LEONARDO
Address: 6571 S. MAGNOLIA AVE.
City-St-Zip: OCALA, FL 34471

Title: D (X) Change () Addition
Name: MARTELLI, MINA
Address: 6561 S. MAGNOLIA AVE.
City-St-Zip: OCALA, FL 34471

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: GOFFREDO MARTELLI

D

08/08/2007

Electronic Signature of Signing Officer or Director

Date