

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001076

FILED
Feb 09, 2009
Secretary of State

Entity Name: MAPLEWOOD VILLAS CONDO OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3918 VILABELLA DRIVE
SEBRING, FL 33872

New Principal Place of Business:

Current Mailing Address:

3918 VILABELLA DRIVE
SEBRING, FL 33872

New Mailing Address:

4719 MERCADO DRIVE
SEBRING, FL 33872

FEI Number: 59-2499665

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KURTYKA, YVONNE
3918 VILABELLA DRIVE
SEBRING, FL 33872 US

Name and Address of New Registered Agent:

KURTYKA, YVONNE
4719 MERCADO DRIVE
SEBRING, FL 33872 US

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:

02/09/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WARNER, CINDY
Address: 3914 VILABELLA DRIVE
City-St-Zip: SEBRING, FL 33872

Title: VP () Delete
Name: BALLOWE, DOROTHY
Address: 3912 VILABELLA DRIVE
City-St-Zip: SEBRING, FL 33872

Title: SEC () Delete
Name: PONTIOUS, KATHY
Address: 2901 WYNSTONE DRIVE
City-St-Zip: SEBRING, FL 33875

Title: TREA () Delete
Name: KURTYKA, YVONNE
Address: 3918 VILABELLA DRIVE
City-St-Zip: SEBRING, FL 33872

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: YVONNE KURTYKA

TRES

02/09/2009

Electronic Signature of Signing Officer or Director

Date