2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005023

Entity Name: MAIDEN'S PUB ASSOCIATION II

FILED Jan 20, 2009 Secretary of State

Entity Nar	ne: MAIDEN'	S PUB ASSOCIATION, INC.					
Current Principal Place of Business:				New Principal Place of Business:			
11206 SHADY GLEN DR JACKSONVILLE, FL 32257				2786 MARQUOIS DR ORANGE PARK, FL 32073			
Current Mailing Address:				New Mailing Address:			
11206 SHADY GLEN DR JACKSONVILLE, FL 32257				2786 MARQUOIS DR ORANGE PARK, FL 32073			
FEI Number:	51-0581325	FEI Number Applied For ()	FEI Number Not	Applicable () Certificate o	of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
LANGSTON, BRYAN M 11206 SHADY GLEN DR JACKSONVILLE, FL 32257 US				LANGSTON, BRYAN M 2786 MARQUOIS DR ORANGE PARK, FL 32073 US			
The above in the State	named entity : of Florida.	submits this statement for the	purpose of changi	ng its regis	tered office or regi	stered agent, or both,	
SIGNATURE: BRYAN LANGSTON				01/20/2009			
	Electror	nic Signature of Registered A	gent		Da	te	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D () BROWN, THOM 97 SPRING ST ST. AUGUSTIN		Title: Name: Address: City-St-Z	ip:	()Change ()A	Addition	
Title: Name: Address: City-St-Zip:	D () LANGSTON, BF 11206 SHDY G JACKSONVILL	LEN DR	Title: Name: Address: City-St-Z	2786 N	(X) Change()/ TON, BRYAN M IARQUOIS DR BE PARK, FL 32073	Addition	
Title: Name: Address: City-St-Zip:	D () VANDIVER, MA 11206 SHADY JACKSONVILLI	GLEN DR	Title: Name: Address: City-St-Z		()Change ()A	Addition	
Title: Name: Address: City-St-Zip:	D () PHILLIP, REED 5757 ANTOINE JACKSONVILLI	TTE LN	Title: Name: Address: City-St-Z	ip:	()Change()A	Addition	

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: BRYAN LANGSTON D 01/20/2009