

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Jul 14, 2009  
Secretary of State**

DOCUMENT# N06000006695

**Entity Name:** MAGNOLIA PARK ESTATES HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**5844 OLD PASCO ROAD  
SUITE 100  
WESLEY CHAPEL, FL 33544**New Principal Place of Business:****Current Mailing Address:**5844 OLD PASCO ROAD  
SUITE 100  
WESLEY CHAPEL, FL 33544**New Mailing Address:**

FEI Number: 20-4635951

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**RIZZETTA & COMPANY  
5844 OLD PASCO ROAD  
SUITE 100  
WESLEY CHAPEL, FL 33544 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: P ( ) Delete  
Name: THOMPSON, LEE R  
Address: 4343 ANCHOR PLAZA PARKWAY SUITE 200  
City-St-Zip: TAMPA, FL 33634Title: VP ( ) Delete  
Name: MCCOOK, CECE  
Address: 300 COLONIAL CENTER PKWY #200  
City-St-Zip: LAKE MARY, FL 32746Title: ST ( ) Delete  
Name: CAMPBELL, JUSTIN  
Address: 300 COLONIAL CENTER PKWY #200  
City-St-Zip: LAKE MARY, FL 32746**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:

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: LEE R. THOMPSON

P

07/14/2009

Electronic Signature of Signing Officer or Director

Date