

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008172

FILED  
Apr 15, 2008  
Secretary of State

**Entity Name:** MOCKINGBIRD CROSSING HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

2235 VENETIAN COURT  
NAPLES, FL 34109

**New Principal Place of Business:**

2235 VENETIAN COURT  
SUITE #5  
NAPLES, FL 34109

**Current Mailing Address:**

2235 VENETIAN COURT  
NAPLES, FL 34109

**New Mailing Address:**

2235 VENETIAN COURT  
SUITE #5  
NAPLES, FL 34109

FEI Number: 51-0595626

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SCHIFFMAN, ALAN T  
2235 VENETIAN COURT  
NAPLES, FL 34109 US

**Name and Address of New Registered Agent:**

SCHIFFMAN, ALAN T  
2235 VENETIAN COURT  
SUITE #5  
NAPLES, FL 34109 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:

04/15/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SCHIFFMAN, ALAN T  
Address: 2235 VENETIAN COURT  
City-St-Zip: NAPLES, FL 34109 US

Title: VP ( ) Delete  
Name: CROSS, WILLIAM P  
Address: 2235 VENETIAN COURT  
City-St-Zip: NAPLES, FL 34109 US

Title: S/T ( ) Delete  
Name: BRENNAN, ANNETTE N  
Address: 2235 VENETIAN COURT  
City-St-Zip: NAPLES, FL 34109 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: SCHIFFMAN, ALAN T  
Address: 2235 VENETIAN COURT #5  
City-St-Zip: NAPLES, FL 34109 US

Title: VP (X) Change ( ) Addition  
Name: CROSS, WILLIAM P  
Address: 2235 VENETIAN COURT #5  
City-St-Zip: NAPLES, FL 34109 US

Title: S/T (X) Change ( ) Addition  
Name: BRENNAN, ANNETTE N  
Address: 2235 VENETIAN COURT #5  
City-St-Zip: NAPLES, FL 34109 US

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: ALAN T. SCHIFFMAN

P

04/15/2008

Electronic Signature of Signing Officer or Director

Date