

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06685

FILED
Mar 04, 2011
Secretary of State

Entity Name: MUIR-VILLAS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3461-B FAIRLANE FARMS RD.
WELLINGTON, FL 334141006 US

New Principal Place of Business:

C/O THE CONTINENTAL GROUP, INC.
3461-B FAIRLANE FARMS ROAD
WELLINGTON, FL 33414 US

Current Mailing Address:

3461-B FAIRLANE FARMS RD.
WELLINGTON, FL 334141006 US

New Mailing Address:

C/O THE CONTINENTAL GROUP, INC.
3461-B FAIRLANE FARMS ROAD
WELLINGTON, FL 33414 US

FEI Number: 59-2487031

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWSOME, JOHN
C/O WELLINGTON MANAGEMENT
3461-B FAIRLANE FARMS RD.
WELLINGTON, FL 33414 US

Name and Address of New Registered Agent:

HARTLEY & MORTON, ATTORNEYS AT LAW
800 VILLAGE SQUARE CROSSING
SUITE 222
PALM BEACH GARDENS, FL 33410 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: HARTLEY & MORTON, ATTORNEYS AT LAW

03/04/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: CARTER, JAMES
Address: 2550 MUIR CIRCLE
City-St-Zip: WELLINGTON, FL 33414

Title: T
Name: HODGES, RALPH
Address: 2419 MUIR CIR
City-St-Zip: WELLINGTON, FL 33414

Title: VP
Name: PARADI, JOSEPH C
Address: 2490 MUIR CIRCLE
City-St-Zip: WELLINGTON, FL 33414

Title: P
Name: BROWN, CAROLE
Address: 2575 MUIR CIRCLE
City-St-Zip: WELLINGTON, FL 33414

Title: D
Name: KINGSFORD, DANIEL
Address: 2502 MUIR CIRCLE
City-St-Zip: WELLINGTON, FL 33414

Title: S
Name: FOOS, BETH
Address: 2539 MUIR CIRCLE
City-St-Zip: WELLINGTON, FL 33414

I hereby 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 all other like empowered.

SIGNATURE: CAROLE BROWN

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03/04/2011

Electronic Signature of Signing Officer or Director

Date