

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001232

FILED  
Mar 30, 2010  
Secretary of State

**Entity Name:** MASONWOOD NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

2001 NW 31ST TERRACE  
GAINESVILLE, FL 32605

**New Principal Place of Business:**

1911 NW 32 TERRACE  
GAINESVILLE, FL 32605

**Current Mailing Address:**

2001 NW 31ST TERRACE  
GAINESVILLE, FL 32605

**New Mailing Address:**

1911 NW 32 TERRACE  
GAINESVILLE, FL 32605

**FEI Number:** 64-0950758

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

QUINCEY, JAMES S  
1934 NW 32ND TERRACE  
GAINESVILLE, FL 32605 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: D  
Name: STEPHENSON, BILL  
Address: 2019 NW 31ST TERRACE  
City-St-Zip: GAINESVILLE, FL 32605

Title: D  
Name: MATILSKY, DEBBIE  
Address: 1848 NW 32 TERRACE  
City-St-Zip: GAINESVILLE, FL 32605

Title: D  
Name: LIVINGSTON, ROBERT  
Address: 1701 NW 31ST TERRACE  
City-St-Zip: GAINESVILLE, FL 32605

Title: D  
Name: ALTY, RACHEL  
Address: 1911 NW 32ND TERRACE  
City-St-Zip: GAINESVILLE, FL 32605

Title: D  
Name: ROSSELLE, BILL  
Address: 3114 NW 21ST AVENUE  
City-St-Zip: GAINESVILLE, FL 32605

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: RACHEL ALTY

D

03/30/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date