

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010855

FILED
Feb 18, 2010
Secretary of State

Entity Name: MAPLE CORNER HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

223 OAK STREET SW
#23
LABELLE, FL 33935

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 632
LABELLE, FL 33975

New Mailing Address:

FEI Number: 26-3799287

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRAFT, CAROL
223 OAK STREET SW
#23
LABELLE, FL 33935 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
Name: FIDANZA, NICHOLAS S
Address: 224 OAK STREET SW
City-St-Zip: LABELLE, FL 33935

Title: VP
Name: KUEHNE, CHARLES
Address: 232 OAK STREET SW
City-St-Zip: LABELLE, FL 33935

Title: VP
Name: SCHLITTER, JOHN A JR
Address: 347 BOTTLEBRUSH AVE. SW
City-St-Zip: LABELLE, FL 33935

Title: S
Name: KRAFT, CAROL
Address: 223 OAK STREET SW
City-St-Zip: LABELLE, FL 33935

Title: T
Name: CULLIGAN, DANIEL
Address: 228 OAK STREET SW
City-St-Zip: LABELLE, FL 33935

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: DANIEL P. CULLIGAN

T

02/18/2010

Electronic Signature of Signing Officer or Director

Date