

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Apr 28, 2009
Secretary of State

DOCUMENT# N10096

Entity Name: MANDARIN GLEN CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**11512 LAKE MEAD AVE
SUITE 405
JACKSONVILLE, FL 32256**New Principal Place of Business:**3270 RICKY DRIVE
UNIT 1304
JACKSONVILLE, FL 32223**Current Mailing Address:**11512 LAKE MEAD AVE
SUITE 405
JACKSONVILLE, FL 32256**New Mailing Address:**11111-70 SAN JOSE BLVD
PMB 286
JACKSONVILLE, FL 32223**FEI Number:** 59-2564623**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:****Name and Address of New Registered Agent:**FISHER, MARCELLE T
11111-70 SAN JOSE BLVD
PMB 286
JACKSONVILLE, FL 32223 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: MARCELLE T FISHER

04/28/2009

Electronic Signature of Registered Agent

Date

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

Title: P () Delete
Name: BLUNNY, TONY
Address: 3270 RICKY DRIVE, #2004
City-St-Zip: JACKSONVILLE, FL 32223

Title: D () Change (X) Addition
Name: TAYLOR, FAITH
Address: 3270 RICKY DRIVE # 1801
City-St-Zip: JACKSONVILLE, FL 32223

Title: VP () Delete
Name: ARROYO, RAY
Address: 3270 RICKY DRIVE, #502
City-St-Zip: JACKSONVILLE, FL 32223

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: AT () Delete
Name: MCCLURE, BARBARA
Address: 2370 RICKY DRIVE, #2304
City-St-Zip: JACKSONVILLE, FL 32223

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S () Delete
Name: RAMOS-GINES, VILMA
Address: 3270 RICKY DRIVE, #1202
City-St-Zip: JACKSONVILLE, FL 32223

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Delete
Name: SEYMOUR, BETTE
Address: 3270 RICKY DRIVE, # 1602
City-St-Zip: JACKSONVILLE, FL 32223

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: MARCELLE T. FISHER

MGR

04/28/2009

Electronic Signature of Signing Officer or Director

Date