

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11800

FILED
May 16, 2009
Secretary of State

Entity Name: THE MAINE VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

9919-9927 E. BAY HARBOR DR
BAY HARBOR ISLANDS, FL 33154 US

New Principal Place of Business:

Current Mailing Address:

18 IVY STREET
PORTLAND, ME 04102

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MCINTOSH, JOHN
3600 MYSTIC POINT DR.
APT 101
AVENTURA, FL 33180 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: PDT () Delete
Name: PARENT, JOSEPH R.
Address: 18 IVY ST.
City-St-Zip: PORTLAND, ME 04102

Title: VPSD () Delete
Name: MCINTOSH, JOHN
Address: 3600 MYSTIC POINT DR APT. 101
City-St-Zip: AVENTURA, FL 33180

Title: D () Delete
Name: BARDAWIL, ELIE
Address: 19440 E. LAKE DR.
City-St-Zip: MIAMI, FL 33015

Title: S () Delete
Name: TELESCO, TOM
Address: 9927 E BAY HARBOR DR
City-St-Zip: BAY HARBOR ISLAND, FL 33154

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: E. BARDAWIL

SECT

05/16/2009

Electronic Signature of Signing Officer or Director

Date