

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12575

FILED
Feb 19, 2007
Secretary of State

Entity Name: MARLBORO FARMS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

330 SW 165TH ST
NEWBERRY, FL 32669 US

New Principal Place of Business:

110 SW 165TH ST
NEWBERRY, FL 32669 US

Current Mailing Address:

330 SW 165TH ST
NEWBERRY, FL 32669 US

New Mailing Address:

110 SW 165TH ST
NEWBERRY, FL 32669 US

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOO, ANNA
330 SW 165TH ST
NEWBERRY, FL 32669 US

Name and Address of New Registered Agent:

WILLIAMS, DARRYL
110SW 165TH ST
NEWBERRY, FL 32669 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: DARRYL WILLIAMS

02/19/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MOO, ANNA
Address: 330 S.W. 165TH ST.
City-St-Zip: NEWBERRY, FL 32669

Title: VP () Delete
Name: NICHOLAS, DIANE
Address: 126 SW 165TH ST
City-St-Zip: NEWBERRY, FL 32669

Title: ST () Delete
Name: LEWIS, MIKE
Address: 215 SW 165 STREET
City-St-Zip: NEWBERRY, FL 32669

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WILLIAMS, DARRYL
Address: 110 S.W. 165TH ST.
City-St-Zip: NEWBERRY, FL 32669

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

Title: ST (X) Change () Addition
Name: OTRADOVEC, CYNTHIA
Address: 16637 SW 5TH PLACE
City-St-Zip: NEWBERRY, FL 32669

I hereby certify that the information supplied with this filing does not qualify for the 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: CYNTHIA OTRADOVEC

ST

02/19/2007

Electronic Signature of Signing Officer or Director

Date