## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N14205

FILED Apr 09, 2007 Secretary of State

Entity Name: ASSOCIATION OF MARION LANDING OWNERS, INC.

Current Principal Place of Business: New Principal Place of Business:

2801 S.W. ARCHER ROAD 8457 S.W. 65TH AVENUE ROAD

GAINESVILLE, FL 32608 OCALA, FL 34476

Current Mailing Address: New Mailing Address:

8009 S. ORANGE AVE ORLANDO, FL 32809

FEI Number: 59-2665552 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:

FURLOW, REBECCA 8009 S. ORANGE AVE ORLANDO, FL 32809 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:

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 RAPPONY, JOSEPH
 Name:
 RAFFONY, JOSEPH

 Address:
 8727 SW 60TH CIRCLE
 Address:
 8727 SW 60TH CIRCLE

 City-St-Zip:
 OCALA, FL 34476
 City-St-Zip:
 OCALA, FL 34476

Title: T ( ) Delete Title: T (X) Change ( ) Addition Name: WILBERG, GLORIA Name: BENTLEY, MARY

 Address:
 6034 SW 86TH LANE
 Address:
 6504 SW 84TH PLACE ROAD

 City-St-Zip:
 OCALA, FL 34476
 City-St-Zip:
 OCALA, FL 34476

Title: 2VP ( ) Delete Title: 2VP (X) Change ( ) Addition Name: MCGUIRE, DENIS Name: WURST, BILL

Address: 8735 SW 60TH CIRCLE Address: 6055 SW 84TH PLACE ROAD

City-St-Zip: OCALA, FL 34476 City-St-Zip: OCALA, FL 34476

Title: 1VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BECKER, PHILLIP
 Name:

 Address:
 8720 SW 60TH CIRCLE
 Address:

 City-St-Zip:
 OCALA, FL 34476
 City-St-Zip:

Title: 2 VP ( ) Delete Title: S (X) Change ( ) Addition

 Name:
 MCGUIRE, DENIS
 Name:
 HERRICK, GORDON

 Address:
 8735 SW 60TH CIRCLE
 Address:
 8556 SW 61ST COURT

 City-St-Zip:
 OCALA, FL 34476
 City-St-Zip:
 OCALA, FL 34476

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: JOSEPH RAFFONY P 04/09/2007