

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15779

**FILED**  
**Jan 13, 2010**  
**Secretary of State**

**Entity Name:** MAGNOLIA BLUFF PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

1035 SW MAGNOLIA BLUFF DR  
PALM CITY, FL 34990 US

**New Principal Place of Business:**

**Current Mailing Address:**

1035 SW MAGNOLIA BLUFF DR  
PALM CITY, FL 34990 US

**New Mailing Address:**

**FEI Number:** 65-0114605

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORNETT, JANE L  
401 EAST OSCEOLA STREET  
STUART, FL 34994 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: VOSS, ROBERT  
Address: 1005 SW MAGNOLIA BLUFF DR  
City-St-Zip: PALM CITY, FL 34990

Title: V  
Name: SPEARS, MARK  
Address: 1225 SW MAGNOLIA BLUFF DR  
City-St-Zip: PALM CITY, FL 34990

Title: V  
Name: DRISCOLL, ROBERT  
Address: 1226 SW MAGNOLIA BLUFF DR.  
City-St-Zip: PALM CITY, FL 34990

Title: S  
Name: HUGGINS, PRISCILLA  
Address: 1146 SW MAGNOLIA BLUFF DR.  
City-St-Zip: PALM CITY, FL 34990

Title: T  
Name: JACQUES, NORM  
Address: 1035 SW MAGNOLIA BLUFF DR.  
City-St-Zip: PALM CITY, FL 34990

Title: D  
Name: DONLEY, CHRIS  
Address: 1165 SW MAGNOLIA BLUFF DR.  
City-St-Zip: PALM CITY, FL 34990

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: NORM JACQUES

T

01/13/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date