

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16802

FILED
Mar 20, 2009
Secretary of State

Entity Name: MAPLELOFT SUBDIVISION OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2651 MAPLELOFT LANE
SARASOTA, FL 34232 US

New Principal Place of Business:

Current Mailing Address:

2651 MAPLELOFT LANE
SARASOTA, FL 34232 US

New Mailing Address:

FEI Number: 59-2714784

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THEIS, GERTRUDE E
2651 MAPLELOFT LANE
SARASOTA, FL 34232 US

Name and Address of New Registered Agent:

THEIS, GERTRUDE E MRS
2651 MAPLELOFT LANE
SARASOTA, FL 34232 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: GERTRUDE E. THEIS

03/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LIPPERT, NANCY
Address: 2527 MAPLELOFT ROAD
City-St-Zip: SARASOTA, FL 34232

Title: S () Delete
Name: BECK, JUDY
Address: 2522 MAPLELOFT ROAD
City-St-Zip: SARASOTA, FL 34232

Title: T () Delete
Name: THEIS, GERTRUDE
Address: 2651 MAPLELOFT LANE
City-St-Zip: SARASOTA, FL 34232

Title: D () Delete
Name: MARWEDE, GLORIA
Address: 2615 MAPLELOFT ROAD
City-St-Zip: SARASOTA, FL 34232

Title: D (X) Delete
Name: BROWN, KYLE
Address: 2562 MAPLELOFT ROAD
City-St-Zip: SARASOTA, FL 34232

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FISK, LAURIE W MRS
Address: 2604 MAPLELOFT LANE
City-St-Zip: SARASOTA, FL 34232

Title: S (X) Change () Addition
Name: ROSE, DARREN C MR
Address: 2551 MAPLELOFT ROAD
City-St-Zip: SARASOTA, FL 34232

Title: T (X) Change () Addition
Name: THEIS, GERTRUDE E MRS
Address: 2651 MAPLELOFT LANE
City-St-Zip: SARASOTA, FL 34232

Title: VP (X) Change () Addition
Name: MARWEDE, GLORIA MRS
Address: 2615 MAPLELOFT ROAD
City-St-Zip: SARASOTA, FL 34232

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: GERTRUDE E. THEIS

T

03/20/2009

Electronic Signature of Signing Officer or Director

Date