

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21789

FILED
Feb 23, 2009
Secretary of State

Entity Name: MCGREGOR PINES COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

14749 MAHOE COURT
FORT MYERS, FL 33908 US

New Principal Place of Business:

14878 MAHOE COURT
FORT MYERS, FL 33908 US

Current Mailing Address:

14749 MAHOE COURT
FORT MYERS, FL 33908 US

New Mailing Address:

14878 MAHOE COURT
FORT MYERS, FL 33908 US

FEI Number: 65-0395710

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HORMOZDI, LILLIAN
14749 MAHOE COURT
FORT MYERS, FL 33908 US

Name and Address of New Registered Agent:

MCCOMBS, BERNARD G PRES
14878 MAHOE COURT
FORT MYERS, FL 33908 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: BERNARD G. MCCOMBS

02/23/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HORMOZDI, LILLIAN
Address: 14749 MAHOE COURT
City-St-Zip: FORT MYERS, FL 33908 US

Title: TD () Delete
Name: JENNETT, PAM
Address: 14957 MAHOE COURT
City-St-Zip: FORT MYERS, FL 33908 US

Title: SD () Delete
Name: HOMSI, PAT
Address: 14910 MAHOE CT
City-St-Zip: FORT MYERS, FL 33908

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MCCOMBS, BERNARD G
Address: 14878 MAHOE COURT
City-St-Zip: FORT MYERS, FL 33908 US

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

Title: SD (X) Change () Addition
Name: PRESLEY, CAROLE
Address: 14766 MAHOE CT
City-St-Zip: FORT MYERS, FL 33908

Title: VPD () Change (X) Addition
Name: WASHER, THOMAS
Address: 14830 MAHOE CT
City-St-Zip: FORT MYERS, FL 33908

Title: D () Change (X) Addition
Name: MARTELLI, LOUIS
Address: 14845 MAHOE CT
City-St-Zip: FORT MYERS, FL 33908

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: BERNARD G. MCCOMBS

PD

02/23/2009

Electronic Signature of Signing Officer or Director

Date