2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29188

FILED Apr 19, 2012 Secretary of State

Entity Name: MISSION VILLAGE AT MOUNT DORA HOMEOWNERS' ASSOCIATION, INC.

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

30940 MISSION AVE. 30912 MISSION AVE

TAVARES, FL 32778 US TAVARES, FL 32778 US

Current Mailing Address: New Mailing Address:

30940 MISSION AVE. 30912 MISSION AVE

TAVARES, FL 32778 US TAVARES, FL 32778 US

FEI Number: 65-0120790 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:

KOHLI, JUDY CROFT, CYNTHIA
30940 MISSION AVE.
TAVARES, FL 32778 US TAVARES, FL 32778 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: CYNTHIA CROFT 04/19/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: [

Name: HUGHES, BEN
Address: 30901 MISSION AVE
City-St-Zip: TAVARES, FL 32778

Title: P

Name: DESROSIERS, BETH Address: 30911 MISSION AVE City-St-Zip: TAVARES, FL 32778

Title: S

Name: OPPERMAN, BILL
Address: 30843MISSION AVE
City-St-Zip: TAVARES, FL 32778

Title: T

 Name:
 CROFT, CYNTHIA

 Address:
 30912 MISSION AVE

 City-St-Zip:
 TAVARES, FL 32778

Title: VD

Name: HUGHES, BEN
Address: 30901 MISSION AVE
City-St-Zip: TAVARES, FL 32778

Title:

Name: MARGOT, HOWELL Address: 30939 MISSION AVE City-St-Zip: TAVARES, FL 32778

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: BEN HUGHES D 04/19/2012