2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N22206

FILED Apr 12, 2007 8:00 am Secretary of State 04-12-2007 90038 041 ****61.25

1. Entity Name MAINSAIL COMMONS ASSOCIATION, INC.														3.1. 2 .
P.O. BOX 2632 P.O.				ling Address). BOX 2632 RCO ISLAND, FL 34146				(14 0) POB (141	, , , , , , , , , , , , , , , , , , ,	(0)15 5114 1	51 7 11 51 311 5	1874 BIBII B1BIB P	IBINDI SI IBSJ	
Principal Place of Business - No P.O. Box # Mailing Address					· · ·									
Suite, Apt. #, etc.			Sui	Suite, Apt. #, etc.			03282	007 _C	Chg-NP		CR2E	37 (12/06)		
City & State			City	City & State				4. FEI N 65-	Number 01314	82			⊢	Applied For Not Applicable
Zip	Zip Country		Zip			intry		5. Certificate of Status Desired \$8.75 Address Require						
	6. Name	and Address of Curren	t Registere	d Agent		Nama		7. Nam	e and Ad	dress of	New Re	gistered	Agent	
GRUESEL, JAMIE 1104 N COLLIER BLVD						Name Street A	ddress (I	P.O. Box f	Jumber is	Not Acc	entable)	1		
MARCO IS						Street Address (P.O. Box Number is Not Acceptable)								
						City						FI	Zip Co	de
	tions of regist	ry submits this statement tered agent.							_	n the Stat	e of Flor		familiar with	n, and accept
	Signature, typed	Tor printed harre or registered age	nit and the mapp		t: Hegistere	o Agent signal	ture required	when reinstat	ing)			DATE		
	Filing Fe	ee is \$61.25 May 1, 2007	and the napp	9. Election Car Trust Fund C	mpaign F	inancing	Die requireo	\$5.00 Added to	May Be			ske ched	ck payable artment of	
10.	Filing Fe Due by N	e is \$61.25		9. Election Car Trust Fund C	mpaign F	inancing		\$5.00 Added to	May Be Fees	GES TO C	Flori	ake ched da Depa		State
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THE STA

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

234389 5404 Daytme Phone #