

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33304

FILED
May 04, 2009
Secretary of State

Entity Name: MANOR SHORES VILLAS TOWNHOME OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

220 ANGLER AVE
4
FORT WALTON BEACH, FL 32548 US

New Principal Place of Business:

Current Mailing Address:

220 ANGLER AVE
4
FORT WALTON BEACH, FL 32548 US

New Mailing Address:

FEI Number: 59-2961916 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

FIELDS, WESLEY
220 ANGLER DRIVE #4
FORT WALTON BEACH, FL 32548 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RUSSELL, JOHNY B.
Address: 220 ANGLER DRIVE #2
City-St-Zip: FT. WALTON BCH, FL

Title: PD () Delete
Name: FIELDS, WES
Address: 220 ANGLER DR. #4
City-St-Zip: FT. WALTON BEACH, FL 32548

Title: STD () Delete
Name: TULL, JUANITA M
Address: 220 ANGLER DRIVE #5
City-St-Zip: FORT WALTON BEACH, FL 32548

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WALLACE, LISA
Address: 220 ANGLER DRIVE #6
City-St-Zip: FT. WALTON BCH, FL

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

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

Title: D () Change (X) Addition
Name: CORKILL, FRED
Address: 220 ANGLER DRIVE #7
City-St-Zip: FORT WALTON BEACH, FL 32548

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: JUANITA TULL

STD

05/04/2009

Electronic Signature of Signing Officer or Director

Date