

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33643

FILED  
May 04, 2010  
Secretary of State

**Entity Name:** MAYFIELD HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

704 CHILT DR  
BRANDON, FL 33510 US

**New Principal Place of Business:**

602 CHILT DR  
BRANDON, FL 33510 US

**Current Mailing Address:**

POST OFFICE BOX 356  
SEFFNER, FL 33583356 US

**New Mailing Address:**

**FEI Number:** 59-3026132      **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:**

GENE, ADKINS  
601 CHILT DR  
BRANDON, FL 33510 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: TD  
Name: SWISHER, ADRIENNE  
Address: 602 CHILT DR  
City-St-Zip: BRANDON, FL 33510

Title: SD  
Name: BUTLER, STACEY  
Address: 606 CHILT DR  
City-St-Zip: BRANDON, FL 335102561

Title: BMD  
Name: POPOVICH, JEAN  
Address: 502 CHILT DRIVE  
City-St-Zip: BRANDON, FL 33510

Title: BMD  
Name: CARP, STEVE  
Address: 603 CHILT DR.  
City-St-Zip: BRANDON, FL 33510

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: ADRIENNE SWISHER

TD

05/04/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date