

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43437

FILED
Jan 05, 2011
Secretary of State

Entity Name: MASON CREEK LANDINGS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

34448 MASON CREEK LANDINGS
12342 W. RESTVIEW CT.
HOMOSASSA, FL 34448

New Principal Place of Business:

Current Mailing Address:

34448 MASON CREEK LANDINGS
HOMOSASSA, FL 34448

New Mailing Address:

34448 MASON CREEK LANDINGS
12342 W. RESTVIEW CT.
HOMOSASSA, FL 34448

FEI Number: 59-3129837

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STALLINGS, WILLIAM
12342 WEST RESTVIEW CT
HOMOSASSA, FL 34448 US

Name and Address of New Registered Agent:

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: PD
Name: STALLINGS, WILLIAM
Address: 12342 WEST RESTVIEW COURT
City-St-Zip: HOMOSASSA, FL 34448

Title: VPD
Name: MORRIS, HENRY
Address: 12236 WEST RESTVIEW CT
City-St-Zip: HOMOSASSA, FL 34448

Title: STD
Name: ALDERSON, MADISON
Address: 12364 WEST RESTVIEW COURT
City-St-Zip: HOMOSASSA, FL 34448

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: WILLIAM STALLINGS

PRES

01/05/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date