

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45487

FILED
Mar 01, 2007
Secretary of State

Entity Name: MOORE POND HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

6737 HEARTLAND CIR
TALLAHASSEE, FL 32312 US

New Principal Place of Business:

7144 HEARTLAND CIR
TALLAHASSEE, FL 32312 US

Current Mailing Address:

6737 HEARTLAND CIR
TALLAHASSEE, FL 32312 US

New Mailing Address:

7144 HEARTLAND CIR
TALLAHASSEE, FL 32312 US

FEI Number: 59-3181582

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKENE, NEIL
6737 HEARTLAND CIRCLE
TALLAHASSEE, FL 32312 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: VD () Delete
Name: KOPRIVA, DAVID
Address: 7564 HEARTLAND CIR
City-St-Zip: TALLAHASSEE, FL 32312

Title: PD () Delete
Name: COX, GARY
Address: 7485 HEARTLAND CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

Title: TD () Delete
Name: SKENE, NEIL
Address: 6737 HEARTLAND CIR
City-St-Zip: TALLAHASSEE, FL 32312

Title: SD () Delete
Name: DOWNS, PHILIP
Address: 2992 HABERSHAM DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KOPRIVA, DAVID
Address: 7564 HEARTLAND CIR
City-St-Zip: TALLAHASSEE, FL 32312

Title: VD (X) Change () Addition
Name: COX, GARY
Address: 7485 HEARTLAND CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

Title: TD (X) Change () Addition
Name: BOGENREIF, MICHAEL
Address: 7144 HEARTLAND CIR
City-St-Zip: TALLAHASSEE, FL 32312

Title: SD (X) Change () Addition
Name: DOWNS, PHILLIP
Address: 6027 HEARTLAND CIR
City-St-Zip: TALLAHASSEE, FL 32312

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHAEL BOGENREIF

TD

03/01/2007

Electronic Signature of Signing Officer or Director

Date