

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48168

FILED
Jan 15, 2009
Secretary of State

Entity Name: MISSION LAKE VILLAS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

P. O. BOX 410381
MELBOURNE, FL 329410381

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 410381
MELBOURNE, FL 329410381

New Mailing Address:

FEI Number: 59-3141937

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAYDUSKY, ROSANNE
478 CARMEL DRIVE
MELBOURNE, FL 32940 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: SD () Delete
Name: HENLEY, C.K.
Address: 382 CARMEL DR
City-St-Zip: MELBOURNE, FL 32940

Title: TD () Delete
Name: HAYDUSKY, ROSANNE
Address: 478 CARMEL DRIVE
City-St-Zip: MELBOURNE, FL 32940

Title: PD () Delete
Name: BECK, ALLAN
Address: 481 CARMEL DR
City-St-Zip: MELBOURNE, FL 32940

Title: VD () Delete
Name: BELLAK, JOHN
Address: 490 CARMEL DR
City-St-Zip: MELBOURNE, FL 32940

Title: VD () Delete
Name: CAMERON, DAVID
Address: 381 CARMEL DR.
City-St-Zip: MELBOURNE, FL 32940

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: LARSON, LORI
Address: 349 CARMEL DR
City-St-Zip: MELBOURNE, FL 32940

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

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

Title: VD (X) Change () Addition
Name: KRAUSS, RICHARD
Address: 461 CARMEL DR
City-St-Zip: MELBOURNE, FL 32940

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

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: ROSANNE HAYDUSKY

TD

01/15/2009

Electronic Signature of Signing Officer or Director

Date