

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000040

FILED
Apr 01, 2009
Secretary of State

Entity Name: MANGO VILLAS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

ASSOCIATED PROPERTY MGMT
1928 LAKE WORTH RD
LAKE WORTH, FL 33461 US

New Principal Place of Business:

ASSOCIATED PROPERTY MGMT
1928 LAKE WORTH RD
LAKE WORTH, FL 33461 US

Current Mailing Address:

ASSOCIATED PROPERTY MGMT
1928 LAKE WORTH RD
LAKE WORTH, FL 33461 US

New Mailing Address:

ASSOCIATED PROPERTY MGMT
1928 LAKE WORTH RD
LAKE WORTH, FL 33461 US

FEI Number: 65-0398827

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DICKER, EDWARD ESQ
1818 AUSTRALIAN AVE SOUTH
SUITE 400
WEST PALM BEACH, FL 33409 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 () Delete
Name: SPOONER, SCOTT
Address: 326 W. PINE ST. #17
City-St-Zip: LANTANA, FL 33462

Title: T () Delete
Name: LEHTINEN, MEERI
Address: 326 W PINE ST., #16
City-St-Zip: LANTANA, FL 33462

Title: SD () Delete
Name: WHALEN, RICHARD
Address: 328 W. PINE ST. #23
City-St-Zip: LANTANA, FL 33462

Title: D () Delete
Name: MINEO, LINDA
Address: 328 W. PINE ST. #25
City-St-Zip: LANTANA, FL 33462

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: PESANT, CARL
Address: 320 W PINE ST., #2
City-St-Zip: LANTANA, FL 33462

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

Title: T (X) Change () Addition
Name: LEHTINEN, MERRI
Address: 326 W. PINE ST. #16
City-St-Zip: LANTANA, FL 33462

Title: D () Change (X) Addition
Name: MINEO, LINDA
Address: 328 W. PINE ST. #25
City-St-Zip: LANTANA, FL 33462

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: JOHN MATH, APM

AGT

04/01/2009

Electronic Signature of Signing Officer or Director

Date