

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000000558

**FILED**  
**Mar 10, 2010**  
**Secretary of State**

**Entity Name:** MAGNOLIA VILLAGE COMMUNITY SERVICES ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O PLATINUM COAST MGMT  
2625 N HARBOR CITY BLVD#2  
MELBOURNE, FL 32935 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O PLATINUM COAST MGMT  
2625 N HARBOR CITY BLVD#2  
MELBOURNE, FL 32935 US

**New Mailing Address:**

**FEI Number:** 59-3213917

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NUSL, JENNIFER  
3895 VERANDA CT  
MELBOURNE, FL 32901 US

**Name and Address of New Registered Agent:**

MILLER, MARGARET  
3781 TOWN SQUARE BLVD  
MELBOURNE, FL 32901 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: MARGARET MILLER

03/10/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: STD  
Name: HANTTULA, SHERYL  
Address: 3902 VERANDA CT  
City-St-Zip: MELBOURNE, FL 32901

Title: DVP  
Name: KERRIGAN, MIRIAM  
Address: 3862 TOWN SQUARE BLVD  
City-St-Zip: MELBOURNE, FL 32901

Title: PD  
Name: MILLER, PEGGY  
Address: 3787 TOWN SQUARE BLVD  
City-St-Zip: MELBOURNE, FL 32901

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: MARGARET MILLER

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03/10/2010

Electronic Signature of Signing Officer or Director

Date