

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001455

FILED
Apr 30, 2010
Secretary of State

Entity Name: MAGNOLIA POINTE SUBDIVISION HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8595 COLLEGE PKWY
FORT MYERS, FL 33919 US

New Principal Place of Business:

6326 WHISKEY CREEK DRIVE
FORT MYERS, FL 33919 US

Current Mailing Address:

8595 COLLEGE PKWY
FORT MYERS, FL 33919 US

New Mailing Address:

6326 WHISKEY CREEK DRIVE
FORT MYERS, FL 33919 US

FEI Number: 65-0482004

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEGLARZ, CRESHA
12890 MAGNOLIA PTE CT
FORT MYERS, FL 33919 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: VP
Name: BROWN, RICHARD
Address: 10050 MAGNOLIA POINTE
City-St-Zip: FORT MYERS, FL 33919

Title: TSD
Name: WEGLAZ, CRESHA
Address: 12890 MAGNOLIA POINTE
City-St-Zip: FT MYERS, FL 33919

Title: PD
Name: MAZZORANA, IVAN DR
Address: 12891 MAGNOLIA POINTE
City-St-Zip: FORT MYERS, FL 33919

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: IVAN MAZZORANA, MD

DR.

04/30/2010

Electronic Signature of Signing Officer or Director

Date