2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Feb 05, 2008
Secretary of State

DOCUMENT# N94000002687

Entity Name: MAGNOLIA GLEN HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

PO BOX 13531
CLERMONT, FL 347135131 US

New Principal Place of Business:

256 MARGATE DRIVE
DAVENPORT, FL 33897 US

Current Mailing Address:

PO BOX 13531
CLERMONT, FL 347135131 US

New Mailing Address:

PO BOX 13531
CLERMONT, FL 347135131

FEI Number: 59-3321480 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MCCULLOH, NEAL
1065 MAITLAND CENTER COMMONS BLVD.
MAITLAND, FL 32751 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: NEAL MCCULLOH
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DT ( ) Delete
Name: WILLIAMSON, CONNY
Address: 256 MARGATE DR.
City-St-Zip: DAVENPORT, FL 33897

Title: D ( ) Delete
Name: AMENDOLA, JIM
Address: 175 MARGATE DRIVE
City-St-Zip: DAVENPORT, FL 33897

Title: S ( ) Delete
Name: DOYLE, TED
Address: 611 BUWICK DRIVE
City-St-Zip: DAVENPORT, FL 33897

Title: VP ( ) Delete
Name: BELHADI, JANICE W
Address: 175 MARGATE DRIVE
City-St-Zip: DAVENPORT, FL 33897

Title: P (X) Delete
Name: O'HARA, DOUGLAS
Address: 732 BUWICK DRIVE
City-St-Zip: DAVENPORT, FL 33897

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: CHASE, JEREMY
Address: 549 BERWICK DRIVE
City-St-Zip: DAVENPORT, FL 33897

Title: S (X) Change ( ) Addition
Name: WEST- BELHADI, JANICE
Address: 175 MARGATE DRIVE
City-St-Zip: DAVENPORT, FL 33897

Title: P (X) Change ( ) Addition
Name: O'HARA, DOUGLAS W
Address: 732 BERWICK DRIVE
City-St-Zip: DAVENPORT, FL 33897

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: CONSTANCE J. WILLIAMSON DT 02/05/2008
Electronic Signature of Signing Officer or Director — Date