

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003175

FILED  
Apr 30, 2008  
Secretary of State

**Entity Name:** MAGNOLIA COMMERCE PARK PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

1101 KEMPTON CHASE PKWY  
ORLANDO, FL 32837

**New Principal Place of Business:**

**Current Mailing Address:**

2024 WELLFLEET CT.  
C/O UNIVERSAL AUTO BODY  
ORLANDO, FL 32837 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

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

SACKMAN, SCOTT  
1101 KEMPTON CHASE PKWY  
ORLANDO, FL 32837 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: V ( ) Delete  
Name: SACKMAN, SCOTT  
Address: 1101 KEMPTON CHASE PKWY  
City-St-Zip: ORLANDO, FL 32837

Title: D ( ) Delete  
Name: JEBILEY, MARIO  
Address: 11601 S. ORANGE BLOSSOM TRAIL, STE 101  
City-St-Zip: ORLANDO, FL 32837

Title: P ( ) Delete  
Name: RAMSAMMY, SUCIL  
Address: 1101 KEMPTON CHASE PKWY  
City-St-Zip: ORLANDO, FL 32837

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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: SUCIL RAMSAMMY

P

04/30/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date