

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004180

FILED  
Feb 24, 2011  
Secretary of State

Entity Name: MIRABELLA HOMEOWNER'S ASSOCIATION, INC.

## Current Principal Place of Business:

C/O QUALIFIED PROPERTY MGT  
1301 SEMINOLE BLVD #110  
LARGO, FL 33770 US

## New Principal Place of Business:

C/O QUALIFIED PROPERTY MANAGEMENT INC  
5901 US HWY 19, SUITE 7Q  
NEW PORT RICHEY, FL 34652 US

## Current Mailing Address:

C/O QUALIFIED PROPERTY MGT  
1301 SEMINOLE BLVD #110  
LARGO, FL 33770 US

## New Mailing Address:

C/O QUALIFIED PROPERTY MANAGEMENT INC  
5901 US HWY 19, SUITE 7Q  
NEW PORT RICHEY, FL 34652 US

FEI Number: 59-3316675

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

QUALIFIED PROPERTY MANAGEMENT INC  
5901 US 19 N.  
SUITE 7Q  
NEW PORT RICHEY, FL 34652 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  
Name: MEIER, MARK  
Address: 4646 MIRABELLA COURT  
City-St-Zip: SAINT PETERSBURG BEACH, FL 33706

Title: TD  
Name: RUSSELL, ROBERT  
Address: 4641 MIRABELLA CT  
City-St-Zip: ST PETERSBURG BEACH, FL 33706

Title: VD  
Name: SEIDENSTRICKER, PETER  
Address: 4628 MIRABELLA CT  
City-St-Zip: SAINT PETERSBURG BEACH, FL 33706

Title: D  
Name: FREESE, DON  
Address: 4687 MIRABELLA CT  
City-St-Zip: SAINT PETERSBURG BEACH, FL 33706

Title: SD  
Name: AHREN, JANET  
Address: 4603 MIRABELLA COURT  
City-St-Zip: SAINT PETERSBURG BEACH, FL 33706

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: MARK MEIER

PD

02/24/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date