## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N95000003697

FILED Jan 11, 2010 Secretary of State

Entity Name: MALLARDS REACH SUBDIVISION HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

7 MANDERLEY LN. ORMOND BEACH, FL 32174

Current Mailing Address: New Mailing Address:

7 MANDERLEY LN. ORMOND BEACH, FL 32174

FEI Number: 59-3622082 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

AVERY, MARIE 7 MANDERLEY LN. ORMOND BEACH, FL 32174 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.

in the otate of Fiori

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Γitle: ¯

SIGNATURE:

Name: THOMAS, DIAN
Address: 23 MANDERLEY LANE
City-St-Zip: ORMOND BEACH, FL 32174

Title: D

Name: KLANGLOTZ, KARLA
Address: 33 MANDERLEY LANE
City-St-Zip: ORMOND BEACH, FL 32174

Title: F

 Name:
 AVERY, MARIE S

 Address:
 7 MANDERLEY LANE

 City-St-Zip:
 ORMOND BEACH, FL 32174

Title: VPD

Name: KLOEPFER, BONNIE
Address: 2 MANDERLEY LANE
City-St-Zip: ORMOND BEACH, FL 32174

Title: [

Name: SMITH, DANA

Address: 5 ARHCHANGEL CIRCLE
City-St-Zip: ORMOND BEACH, FL 32174

Title: [

Name: ELLIOTT, DONA Address: 3 ARCHANGEL

City-St-Zip: ORMOND BEACH, FL 32174

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: MARIE S. AVERY PRES 01/11/2010