

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003498

FILED
Apr 06, 2005
Secretary of State

Entity Name: MARAVILLA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2606 SCENIC GULF DRIVE
DESTIN, FL 32550 US

New Principal Place of Business:

Current Mailing Address:

2606 SCENIC GULF DRIVE
DESTIN, FL 32550 US

New Mailing Address:

FEI Number: 59-3399039

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, LORETTA W
C/O NEWMAN DAILEY
12815 HWY 98 WEST, SUITE 100
DESTIN, FL 32550 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 () Delete
Name: AHRENS, JANE
Address: 146 ST JOHN CT
City-St-Zip: DESTIN, FL 32550

Title: VP () Delete
Name: GRAVITT, NANCY
Address: P.O. BOX 6672
City-St-Zip: GAINESVILLE, GA 30504

Title: STD () Delete
Name: BOULWARE, JEANNA
Address: 1108 CHELSEY COURT
City-St-Zip: BRENTWOOD, TN 37027

Title: D (X) Delete
Name: DOUGLASS, LINDA
Address: 8725HWY N
City-St-Zip: MOUNTAIN GROVE, MO 65711

Title: D () Delete
Name: KELLEY, JACKIE
Address: 9032 GREEN CHASE DR
City-St-Zip: MONTGOMERY, AL 36117

Title: D () Delete
Name: GAY, MACK
Address: 24 BAYVIEW DR
City-St-Zip: FORT WALTON BEACH, FL 32547

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: GRAVITT, NANCY
Address: P.O. BOX 6672
City-St-Zip: GAINESVILLE, GA 30504

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

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

Title: VPD (X) Change () Addition
Name: KELLEY, JACKIE
Address: 9032 GREEN CHASE DR
City-St-Zip: MONTGOMERY, AL 36117

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JANE AHRENS

PRES

04/06/2005

Electronic Signature of Signing Officer or Director

Date