

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000044

FILED
Apr 07, 2009
Secretary of State

Entity Name: MIDDLE RIVER TERRACE NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

1720 NE 9TH AVENUE
FORT LAUDERDALE, FL 33305 US

New Principal Place of Business:

833 NE 17TH COURT
FORT LAUDERDALE, FL 33305 US

Current Mailing Address:

P.O. BOX 4561
FORT LAUDERDALE, FL 33338 US

New Mailing Address:

FEI Number: 65-0442204 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

JUSTIN, DAVID T
908 NE 18TH STREET
FORT LAUDERDALE, FL 33305 US

Name and Address of New Registered Agent:

JUSTIN, DAVID
908 NE 18TH STREET
FORT LAUDERDALE, FL 33305 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.

SIGNATURE: DAVID JUSTIN

04/07/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SMITH, TIM P
Address: 1720 NE 9TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33305 US

Title: S () Delete
Name: ANDERSON, MARGERY D S
Address: 800 NE 16TH CT
City-St-Zip: FT LAUDERDALE, FL 33305 US

Title: V () Delete
Name: O'BRIEN, MARY V
Address: 1617 N DIXIE HIGHWAY
City-St-Zip: FORT LAUDERDALE, FL 33305 US

Title: T () Delete
Name: JUSTIN, DAVID T
Address: 908 NE 18TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33305 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: HENSEL, MARK
Address: 833 NE 17TH COURT
City-St-Zip: FORT LAUDERDALE, FL 33305 US

Title: SECR (X) Change () Addition
Name: ANDERSON, MARGERY D
Address: 800 NE 16TH CT
City-St-Zip: FT LAUDERDALE, FL 33305 US

Title: VICE (X) Change () Addition
Name: HELMS, TIM
Address: 600 NE 15TH COURT
City-St-Zip: FORT LAUDERDALE, FL 33304 US

Title: TREA (X) Change () Addition
Name: JUSTIN, DAVID
Address: 908 NE 18TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33305 US

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: DAVID JUSTIN

TREA

04/07/2009

Electronic Signature of Signing Officer or Director

Date