

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002018

FILED
Apr 15, 2009
Secretary of State

Entity Name: MULDROWS HOME OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

3070 WATERFORD DRIVE
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

3070 WATERFORD DRIVE
TALLAHASSEE, FL 32308

New Mailing Address:

FEI Number: 59-3458850

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MULDROW, WILLIAM R
3070 WATERFORD DRIVE
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

MULDROW, WILLIAM R
3070 WATERFORD DRIVE
TALLAHASSEE, FL 32309 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: WILLIAM R. MULDROW

04/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: MULDROW, WILLIAM R
Address: 3070 WATERFORD DRIVE
City-St-Zip: TALLAHASSEE, FL 32309

Title: SD () Delete
Name: MULDROW-BROOKS, MONICA
Address: 3070 WATERFORD DRIVE
City-St-Zip: TALLAHASSEE, FL 32309

Title: D () Delete
Name: MULDROW, WILLIAM R JR
Address: 3070 WATERFORD DRIVE
City-St-Zip: TALLAHASSEE, FL 32309

Title: TD () Delete
Name: MULDROW, LOTTIE
Address: 3070 WATERFORD DRIVE
City-St-Zip: TALLAHASSEE, FL 32309

Title: SD () Delete
Name: SANDERS, MULDROW, MARCIA
Address: 3070 WATERFORD DRIVE
City-St-Zip: TALLAHASSEE, FL 32309

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:

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: WILLIAM R. MULDOQW

PRES

04/15/2009

Electronic Signature of Signing Officer or Director

Date