

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000007013

FILED
Apr 20, 2004
Secretary of State**Entity Name:** MAGNOLIA POINTE CUSTOM HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**2180 W. S.R. 434
SUITE 5000
LONGWOOD, FL 327795044**New Principal Place of Business:****Current Mailing Address:**2180 W. S.R. 434
SUITE 5000
LONGWOOD, FL 327795044**New Mailing Address:****FEI Number:** 59-3524043**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HART, JR., JAMES W
C/O SENTRY MANAGEMENT INC
2180 WEST SR 434, SUITE 5000
LONGWOOD, FL 32779 US**Name and Address of New Registered Agent:**HART, JAMES W JR
C/O SENTRY MANAGEMENT INC
2180 WEST SR 434, SUITE 5000
LONGWOOD, FL 32779 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: JAMES W HART JR

04/20/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HIMELBERGER, MARK
Address: 13113 SUMMERLAKE WAY
City-St-Zip: CLERMONT, FL 34711

Title: D () Delete
Name: CORNWALL, SCOTT
Address: 17408 TAILFEATHER CT
City-St-Zip: CLERMONT, FL 34711

Title: SD () Delete
Name: MILLS, GIL
Address: 13044 SUMMERLAKE WAY
City-St-Zip: CLERMONT, FL 34711

Title: TD () Delete
Name: DANIELS, NICOLE
Address: 17321 SUMMER OAK LANE
City-St-Zip: CLERMONT, FL 34711

Title: D () Delete
Name: BUCKMAN, BETH E
Address: 13148 SUMMERLAKE WAY
City-St-Zip: CLERMONT, FL 34711

Title: D () Delete
Name: SCHMITZ, DON
Address: 17400 MAGNOLIA VIEW DR
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HIMELBERGER, MARK
Address: 13113 SUMMERLAKE WAY
City-St-Zip: CLERMONT, FL 34711

Title: SD (X) Change () Addition
Name: CORNWALL, SCOTT
Address: 17408 TAILFEATHER CT
City-St-Zip: CLERMONT, FL 34711

Title: PD (X) Change () Addition
Name: MILLS, GIL
Address: 13044 SUMMERLAKE WAY
City-St-Zip: CLERMONT, FL 34711

Title: TD (X) Change () Addition
Name: LEBARRON, JUANITA
Address: 13230 WOODSEdge WAY
City-St-Zip: CLERMONT, FL 34711

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 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: GIL MILLS

PD

04/20/2004

Electronic Signature of Signing Officer or Director

Date

JOHN COLE, VICE PRESIDENT
17413 TAILFEATHER CT
CLERMONT, FL 34711