2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000336

FILED Mar 30, 2010 Secretary of State

Entity Name: MAGNOLIA POINTE LAKEFRONT HOMEOWNERS' ASSOCIATION, INC.

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

2180 WEST SR 434 SUITE 5000

LONGWOOD, FL 327795044

Current Mailing Address: New Mailing Address:

2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 327795044

FEI Number: 59-3524039 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:

HART, JAMES W JR SENTRY MANAGEMENT INC 2180 W SR 434 STE 5000 LONGWOOD, FL 327795044 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VPD

Name: ELLIS, DAVID

Address: 12850 MAGNOLIA POINTE BLVD

City-St-Zip: CLERMONT, FL 34711

Title: SD

Name: BLANKENSHIP, CATHY
Address: 17526 COBBLESTONE LN
City-St-Zip: CLERMONT, FL 34711

Title:

Name: SHAVER, JAMES

Address: 17624 COBBLESTONE LANE City-St-Zip: CLERMONT, FL 34711

Title: TD

Name: ELSWICK, REBECCA

Address: 12903 MAGNOLIA POINTE BLVD.

City-St-Zip: CLERMONT, FL 34711

Title: PD

Name: SIMPSON, BOB

Address: 17618 COBBLESTONE LN City-St-Zip: CLERMONT, FL 34711

Title:

Name: CUNNINGHAM, KEVIN

Address: 12911 MAGNOLIA POINTE BLVD City-St-Zip: CLERMONT, FL 34711

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: BOB SIMPSON PD 03/30/2010