

2005 FORT-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N98000006544

1. Entity Name
MAGNOLIA SHORES HOMEOWNERS' ASSOCIATION OF
MARY ESTHER, INC.



FILED
Apr 27, 2005 8:00 am
Secretary of State

04-27-2005 90286 013 ****61.25

Principal Place of Business
466 SANDMORE SHORES DR.
MARY ESTHER, FL 32569-2379

Mailing Address
466 SANDMORE SHORES DR.
MARY ESTHER, FL 32569-2379

2. Principal Place of Business
451 SANDMORE SHORES DR

3. Mailing Address
451 SANDMORE SHORES DR



03052005 Chg-NP CR2E037 (10/03)

City & State
MARY ESTHER, FL

City & State
MARY ESTHER, FL

4. FEI Number
59-3547251

Applied For
Not Applicable

Zip
32569-2379

Country
USA

Zip
32569-2379

Country
USA

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ZANTEN, STELLA VAN
466 SANDMORE SHORES DR.
MARY ESTHER, FL 32569-2379

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
451 SANDMORE SHORES DR
MARY ESTHER
City
FL Zip Code
32569-2379

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Laurie Philpot* Laurie Philpot S,T 4/22/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 ✓
Due by May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State ✓

10. OFFICERS AND DIRECTORS

TITLE VPD ☒ Delete
NAME WIBLE, JOHN R JR
STREET ADDRESS 474 SANDMORE STORES DR.
CITY-ST-ZIP MARY ESTHER, FL 32569

TITLE PD ☒ Delete
NAME RYMER, ANDREA
STREET ADDRESS 452 SANDMORE STORES DR.
CITY-ST-ZIP MARY ESTHER, FL 32569

TITLE ST ☒ Delete
NAME VAN ZANTEN, STELL
STREET ADDRESS 466 SANDMORE SHORES DR.
CITY-ST-ZIP MARY ESTHER, FL 32569

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VPD ☒ Change ☐ Addition
NAME RONALD VAN ZANTEN
STREET ADDRESS 466 SANDMORE SHORES DR
CITY-ST-ZIP MARY ESTHER, FL 32569-2379

TITLE PD ☒ Change ☐ Addition
NAME JIM FINCHER
STREET ADDRESS 473 SANDMORE SHORES DR -
CITY-ST-ZIP MARY ESTHER, FL 32569-2379

TITLE ST ☒ Change ☐ Addition
NAME LAURIE Philpot
STREET ADDRESS 451 SANDMORE SHORES DR
CITY-ST-ZIP MARY ESTHER, FL 32569-2379

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Laurie Philpot* Laurie Philpot 4/22/05 850-581-4339
Signature and typed or printed name of signing officer or director Date Daytime Phone #