2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2006 8:00 am
Secretary of State
01-20-2006 90024 001 ****61.25

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1. Entity Name
MAGNOLIA CHASE HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2235 CHESTERFIELD CIR LAKELAND, FL 33813	PO BOX 6501 LAKELAND, FL 33807-6501

01132006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-3626820 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
WILLIAMS, EDWARD W 2235 CHESTERFIELD CIR LAKELAND, FL 33807-6501	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 EDWARD W. WILLIAMS (P)
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, 2006

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	X WILLIAMS, EDWARD 2235 CHESTERFIELD CIR LAKELAND, FL 33813	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RICE, BEN 2361 CHESTERFIELD CIR LAKELAND, FL 33813	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P DOCKERY, KEN 2277 CHESTERFIELD CIR. LAKELAND, FL 33813	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GRUBBS, CHARLES 2316 CHESTERFIELD CIR LAKELAND, FL 33813	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP SOSTRE, SAM 2250 CHESTERFIELD CIR. LAKELAND, FL 33813	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T HARRIS, MIKE 2370 CHESTERFIELD CIR. LAKELAND, FL 33813	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S LOVE, SUZANNE 2280 CHESTERFIELD CIR. LAKELAND, FL 33813	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BENNETT, JON 2325 CHESTERFIELD CIR LAKELAND, FL 33813	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Edward Williams President 1/13/06 863-660-5192
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #