2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2007 8:00 am
Secretary of State
03-26-2007 90059 013 ****61.25

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1. Entity Name
MUIRFIELD VILLAGE AT GRASSLANDS CONDOMINIUM ASSOCIATION, INC.

40041014

Principal Place of Business	Mailing Address
3604 HARDEN BLVD. LAKELAND, FL 33803	3604 HARDEN BLVD. LAKELAND, FL 33803

03082007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
5600 U.S. Hwy. 98 N.	P.O. Box 92108
Suite, Apt. #, etc. Suite 1	Suite, Apt. #, etc
City & State Lakeland, Florida	City & State Lakeland, Florida
Zip 33809 Country	Zip 33804 Country

4. FEI Number 59-3610627 ☐ 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
MASS, LEONARD 3604 HARDEN BLVD LAKELAND, FL 33803	Name: Jonn D. Hoppe Street Address (P.O. Box Number is Not Acceptable): 225 E. Lemon Street Suite 300 City: Lakeland FL Zip Code: 33801

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: [signature] 3/8/07
Signature, type 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, 2007

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	PD MASS, LEONARD 3604 HARDEN BLVD LAKELAND, FL 33803	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Sally E. Myers 1501 Grasslands Blvd., Unit #42 Lakeland, Florida 33803	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD SPARKS, GRADY 79-285 RANCHO LA QUINTA DR. LA QUINTA, CA 92253	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD Richard L. Pellegrini 1501 Grasslands Blvd., Unit #62 Lakeland, Florida 33803	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD LONG, WILLIAM B P.O. BOX 1549 JASPER, AL 355021549	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Lois Schmactenberg 1501 Grasslands Blvd., Unit #85 Lakeland, Florida 33803	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T FUSSELL, DONALD R 3604 HARDEN BLVD. LAKELAND, FL 33803	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Robert Sampson 1501 Grasslands Blvd., Unit #21 Lakeland, Florida 33803	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D John Sheppard 1501 Grasslands Blvd., Unit #63 Lakeland, Florida 33803	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ 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: [signature] SALLY MYERS 3/20/07 863-534-0618
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #