

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000030387

Entity Name: MAGNOLIA PARK WEST, INC.

FILED
Jul 06, 2005
Secretary of State

Current Principal Place of Business:

11050 AUTUMN LN.
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

PO BOX 5000
GROVELAND, FL 347365000

New Mailing Address:

FEI Number: 59-3694281

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FULMER, BARBARA B
11050 AUTUMN LN.
CLERMONT, FL 34711 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FULMER, BARBARA
Address: 11050 AUTUMN LN.
City-St-Zip: CLERMONT, FL 34711

Title: P () Delete
Name: FULMER, TIMOTHY A
Address: 13045 SUGAR BLUFF RD
City-St-Zip: CLERMONT, FL 34711

Title: VP () Delete
Name: FULMER, PHILIP R
Address: 8000 CHERRY LAKE RD
City-St-Zip: GROVELAND, FL 34736

Title: VP () Delete
Name: FULMER, CARROLL A
Address: 11610 OSPREY POINTE BLVD
City-St-Zip: CLERMONT, FL 34711

Title: VP () Delete
Name: TURNER, CYNTHIA F
Address: 12928 LOOKINGBILL LANE
City-St-Zip: ATHENS, AL 35611

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARROLL FULMER

PRES

07/06/2005

Electronic Signature of Signing Officer or Director

Date