2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000073576

FILED Apr 26, 2007 Secretary of State

Entity Nai	me: MAGNOL	IA PROPERTIES OF SEBRIN	IG, INC.			
Current Principal Place of Business:			New Principal Place of Business:			
	PORATE BLV TON, FL 3343					
Current Mailing Address:			New Mailing Address:			
	PORATE BLV TON, FL 3343					
FEI Number	: 65-1224067	FEI Number Applied For()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and	Address of	New Registered Agent:	
2201 COR	TEPHEN M PORATE BLV TON, FL 3343					
	named entity see of Florida.	submits this statement for the	purpose of changing i	its registered	office or registered agent, or both,	
SIGNATU	RE:					
		ic Signature of Registered Ag	ent		Date	
Election Car	mpaign Financing	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title:		Delete	Title:	,	X) Change ()Addition	
Name:	RIOUX, RANDA		Name:	RIOUX, RAND		
Address: City-St-Zip:	CORAL SPRING	RSITY DRIVE, STE 102 BS_EL_33067	Address: City-St-Zip:		ERSITY DRIVE, STE 900 NGS, FL 33071	
,,		,			,	
Title:	* .) Delete	Title:	() Change () Addition	
Name:	GATES, ANTHO		Name:			
Address: City-St-Zip:	BOCA RATON,	ATE BLVD STE 103 FL 33431	Address: City-St-Zip:			
Title:	VD ()	Delete	Title:	() Change () Addition	
Name:	BEYER, STEPH		Name:	,	, 3 - ()	
Address:		ATE BLVD, STE 103	Address:			
City-St-Zip:	BOCA RATON,	FL 33431	City-St-Zip:			
Title:	, ,	Delete	Title:	,	X) Change () Addition	
Name:	MAXSON, CHR		Name:	MAXSON, CH		
Address:	548T N. UNIVE	RSITY DR, STE 102	Address:	∠ IU N. UNIVE	RSITY DR, STE 900	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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.

City-St-Zip:

CORAL SPRINGS, FL 33071

SIGNATURE: STEPHEN BEYER 04/26/2007 ٧

CORAL SPRINGS, FL 33067

City-St-Zip: