## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#746930** 

Entity Name: MILLPOND HOMEOWNERS ASSOCIATION, INC.

FILED Apr 28, 2004 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
551 NW 7 <sup>-</sup> #212	551 NW 77TH ST. #212			6421 CONGRESS AVE 110			
BOCA RATON, FL 33487				BOCA RATON, FL 33487			
Current Mailing Address:				New Mailing Address:			
551 NW 77TH ST.				6421 CONGRESS AVE 110			
#212 BOCA RA	TON, FL 3348	7		–	TON, FL 33	487	
FEI Number	: 59-1967903	FEI Number Applied For ( )	FEI Nun	nber Not App	licable ( )	Certificate of Status Desired ( )	
Name and	d Address of C	Surrent Registered Agent:		Name and	Address o	f New Registered Agent:	
AKAM SOUTH, INC. 551 NW 7TH ST #212 BOCA RATON, FL 33487 US				AKAM SOUTH, INC. 6421 CONGRESS AVE 110 BOCA RATON, FL 33487 US			
	e named entity s e of Florida.	submits this statement for the	purpose o	of changing i	ts registere	d office or registered agent, or both,	
SIGNATURE:						04/28/2004	
	Electron	ic Signature of Registered A	gent			Date	
OFFICERS AND DIRECTORS:				ADDITION	IS/CHANGI	ES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	P () Delete KURPIERS, WOLFGANG 3465 PINE HAVEN CIRCLE BOCA RATON, FL 33431			Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	1STV ( ) Delete SCHEER, DANA 2418 NW 36TH ST. p: BOCA RATON, FL 33431			Title: Name: Address: City-St-Zip:	1STV (X) Change ( ) Addition LEARY, BILL 3412 PINE HAVEN CIRCLE BOCA RATON, FL 33431		
Title: Name: Address: City-St-Zip:	2NDV () LABBAD, GEOF 2288 NW 36TH BOCA RATON,	ST.		Title: Name: Address: City-St-Zip:		(X) Change () Addition EORGE BTH STREET DN, FL 33431	
Title: Name: Address: City-St-Zip:	T () DYKAS, CECIL 3501 PINE HAV BOCA RATON,	EN CIRCLE		Title: Name: Address: City-St-Zip:		(X) Change ()Addition ARLES HAVEN CIRCLE DN, FL 33431	
Title: Name: Address: City-St-Zip:	S () LEARY, BILL 3412 PINE HAV BOCA RATON.			Title: Name: Address: Citv-St-Zip:	S SCHNECK, 2421 NE 39 BOCA RATO		

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

SIGNATURE: WOLFGANG KURPIERS P 04/28/2004