


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2007 8:00 am
Secretary of State

03-19-2007 90090 032 ****61.25

DOCUMENT # 750247

1. Entity Name
NOTTINGHAM MANOR CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**4304 LONDONTOWN ROAD
 TITUSVILLE, FL 32796**

Mailing Address
**4304 LONDONTOWN ROAD
 TITUSVILLE, FL 32796**

00024993



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

02052007 Chg-NP CR2E037 (12/06)

City & State
 Zip Country

4. FEI Number
59-2988370

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**TICE, MERLIN
 4304 LONDONTOWN RD
 UNIT # 130
 TITUSVILLE, FL 32796**

7. Name and Address of New Registered Agent

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 MERLIN TICE *Merlin Tice* DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when substituting)

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		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TICE, MERLIN R 4304 LONDONTOWN RD APT 130 TITUSVILLE, FL 32796	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GIRGIN, ANDY 4304 LONDONTOWN RD, #131 TITUSVILLE, FL 32796	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KASEY, CAROL 4304 LONDONTOWN RD, # 107 TITUSVILLE, FL 32796	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MACLEAN, GLORIA 4304 LONDONTOWN RD APT # 224 TITUSVILLE, FL 32796	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RICE, WOODY 4304 LONDONTOWN RD, # 205 TITUSVILLE, FL 32796	<input checked="" type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Andy Girgin 4304 London town Rd Apt 131 Titusville, Fl. 32796	<input checked="" type="checkbox"/>	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Carol Anderson 4304 London town Rd #107 Titusville, Fl. 32796	<input checked="" type="checkbox"/>	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D merlin Tice 4304 London town Rd #130 Titusville, Fl. 32796	<input checked="" type="checkbox"/>	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Loretta Rosata 4304 London town Rd #105 Titusville, Fl. 32796	<input type="checkbox"/>	<input checked="" type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Gloria maclean 4304 London town Rd #224 Titusville, Fl. 32796	<input type="checkbox"/>	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/>	<input type="checkbox"/>

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: *Merlin Tice* **MERLINE E. TICE** Date **3/21-383-7860** Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR