

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Sep 05, 2008 8:00 am**  
**Secretary of State**

09-05-2008 90003 019 \*\*\*\*61.25

**DOCUMENT # N02000000353**

1. Entity Name

**MILL POINT LANDING HOMEOWNERS ASSOCIATION, INC.**



Principal Place of Business

Mailing Address

100 CASHEL MARD DR  
PANAMA CITY FL 32409

PO BO X1631  
LYNN HAVEN FL 32444



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

2nd MOORE

CR2E037 (4/08)

4. FEI Number

01-0574376

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

~~GROSS, GERALD~~  
109 CASHEL MARA DR  
PANAMA CITY FL 32409

*moved*

Name

*Gary Harrington*

Street Address (P.O. Box Number is Not Acceptable)

*115 Cashel Mara Dr.*

City

*Panama, City, FL 32409*

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

*Gary Harrington*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By September 3, 2008**

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	DPS	<input checked="" type="checkbox"/> Delete
NAME	GROSS, GERALD	
STREET ADDRESS	109 CASHEL MARA DR	
CITY-ST-ZIP	PANAMA CITY FL 32409	
TITLE	D	<input type="checkbox"/> Delete
NAME	MERCER, GEORGE	
STREET ADDRESS	523 S GAY AVE	
CITY-ST-ZIP	PANAMA CITY FL 32404	
TITLE	D	<input type="checkbox"/> Delete
NAME	KLUG, GEORGE	
STREET ADDRESS	118 CANDLEWICK PL	
CITY-ST-ZIP	PANAMA CITY FL 32405	
TITLE		<input type="checkbox"/> Delete
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CITY-ST-ZIP		

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NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

*Gary Harrington*

*08/27/08*