
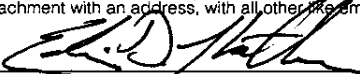


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 8:00 am
Secretary of State

04-29-2004 90259 045 ****61.25

DOCUMENT # N02000008412					
1. Entity Name MILL CREEK AT COLONIAL SECTION II CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business C/O PULTE HOME CORPORATION 9148 BONITA BEACH ROAD, SUITE 102 BONITA SPRINGS, FL 34135			Mailing Address C/O INTEGRATED PROPERTY MGMT. 3435-10TH ST. N., #201 NAPLES, FL 34103		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 56-2354648	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KEMPTON, JOHN STEVEN C/O PULTE HOME CORPORATION 9148 BONITA BEACH ROAD, SUITE 102 BONITA SPRINGS, FL 34135			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 _____ (NOTE: Registered Agent signature required when reinstating)					
Signature, typed or printed name of registered agent and title if applicable.					
Filing Fee Is \$61.25 Due by May 1, 2004		9. Election Campaign Financing <input type="checkbox"/>		\$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 PD	NAME STACKHOUSE, EDWIN D		<input type="checkbox"/> Delete		
STREET ADDRESS 9148 BONITA BEACH RD., STE 102	CITY-ST-ZIP BONITA SPRINGS, FL 34135		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE VD	NAME MEEKS, W. MICHAEL		<input type="checkbox"/> Delete		
STREET ADDRESS 9148 BONITA BEACH RD., SUITE 102	CITY-ST-ZIP BONITA SPRINGS, FL 34135		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE STD	NAME RAY, LAURA		<input type="checkbox"/> Delete		
STREET ADDRESS 9148 BONITA BEACH RD., SUITE 102	CITY-ST-ZIP BONITA SPRINGS, FL 34135		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE 	NAME 		<input type="checkbox"/> Delete		
STREET ADDRESS 	CITY-ST-ZIP 		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE 	NAME 		<input type="checkbox"/> Delete		
STREET ADDRESS 	CITY-ST-ZIP 		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE 	NAME 		<input type="checkbox"/> Delete		
STREET ADDRESS 	CITY-ST-ZIP 		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify 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 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: 			4.15.04		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		
EDWIN D. STACKHOUSE			239-498-7711		
Daytime Phone #			Date		