2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2006
Secretary of State

DOCUMENT# N30414

Entity Name: MOUNT DORA VILLAGE MERCHANTS & BUSINESS ASSOCIATION, INC.

Current Principal Place of Business:

352 NORTH ALEXANDER STREET
P.O. BOX 378
MT. DORA, FL 32757 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 378
MOUNT DORA, FL 32756 US

New Mailing Address:

FEI Number: 59-2968075 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PRITT, BARBARA W
334 DONNELLY ST
MOUNT DORA, FL 32757 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	MIKLESH, LOU	
Address:	120 E. FOURTH AV	
City-St-Zip:	MOUNT DORA, FL 32757 US	
Title:	T	( ) Delete
Name:	PRITT, BARBARA W	
Address:	334 N DONNELLY ST	
City-St-Zip:	MOUNT DORA, FL 32757 US	
Title:	D	( ) Delete
Name:	BROWN, SUSAN	
Address:	438 N. DONNELLY ST	
City-St-Zip:	MT. DORA, FL 32757 US	
Title:	S	( ) Delete
Name:	SHARP, PETER	
Address:	100 ALEXANDER ST	
City-St-Zip:	MOUNT DORA, FL 32757 US	
Title:	D	( ) Delete
Name:	SLEE, CAROL	
Address:	411 N. DONNELLY	
City-St-Zip:	MOUNT DORA, FL 32757 US	
Title:	VP	( ) Delete
Name:	PAYNE, EDGAR	
Address:	322 N. ALEXANDER ST	
City-St-Zip:	MT. DORA, FL 32757 US	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	S	(X) Change ( ) Addition
Name:	BROWN, SUSAN	
Address:	438 N. DONNELLY ST	
City-St-Zip:	MT. DORA, FL 32757 US	
Title:	D	(X) Change ( ) Addition
Name:	COOK, DAVID	
Address:	347 E. 3RD AV	
City-St-Zip:	MOUNT DORA, FL 32757 US	
Title:	D	(X) Change ( ) Addition
Name:	SLEE, CAROL	
Address:	110 W. 3RD ST	
City-St-Zip:	MOUNT DORA, FL 32757 US	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

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

SIGNATURE: BARBARA W. PRITT T 03/17/2006
Electronic Signature of Signing Officer or Director Date