

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001983

FILED
Feb 06, 2009
Secretary of State

Entity Name: MILLPOND ESTATES SECTION FOUR HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

5837 TROUBLE CREEK RD
NEW PORT RICHEY, FL 34652

New Principal Place of Business:

4204 MCCLUNG DR
NEW PORT RICHEY, FL 34653

Current Mailing Address:

5837 TROUBLE CREEK RD
NEW PORT RICHEY, FL 34652

New Mailing Address:

4204 MCCLUNG DR
NEW PORT RICHEY, FL 34653

FEI Number: 59-3254247

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COMMUNITY MANAGEMENT SERVICES INC
5837 TROUBLE CREEK RD
NEW PORT RICHEY, FL 34652 US

Name and Address of New Registered Agent:

BYLSKI, BARBARA J
4204 MCCLUNG DR
NEW PORT RICHEY, FL 34653 US

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: BARBARA J. BYLSKI

02/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: PARSONS, BOB
Address: 4140 MCCLUNG DR
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: T () Delete
Name: BYLSKI, BARBARA
Address: 4204 MCCLUNG DR
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: P () Delete
Name: ISNARDT, THOMAS
Address: 7610 MORNINGDALE DR
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: S () Delete
Name: MUSTO, CHRISTINE
Address: 7604 MORNINGDALE DR
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: VT () Delete
Name: BYLSKI, BARBARA
Address: 4204 MCCLUNG DR
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PARSONS, ROBERT
Address: 4140 MCCLUNG DR
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: CLEMENT, WILLIAM
Address: 4311 OLIN ST
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: BALDWIN, RICHARD
Address: 7618 MORNINGDALE ST
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: D () Change (X) Addition
Name: CARUSO, JOAN
Address: 4217 MCCLUNG DR
City-St-Zip: NEW PORT RICHEY, FL 34653

I hereby certify that the information supplied with this filing does not qualify 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 J. BYLSKI

T

02/06/2009

Electronic Signature of Signing Officer or Director

Date