2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724952

Apr 07, 2009 Secretary of State

Entity Name: MILLICENT CONDOMINIUM INC

Current Principal Place of Business: New Principal Place of Business:

205 NE 3RD STREET

BOYNTON BEACH, FL 33435

Current Mailing Address: New Mailing Address:

P.O. BOX 5802 PO BOX 243399

LAKE WORTH, FL 33466 BOYNTON BEACH, FL 33424

FEI Number: 59-1450756 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MANIDAS, WILLIAM FEICHT, VICKI

639 E OCEAN AVE, STE 307 1500 GÁTEWAY BLVD

BOYNTON BEACH, FL 33435 US 220 BOYNTON BEACH, FL 33426 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: VICKI FEICHT 04/07/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPT (X) Delete Title: () Change () Addition

 Name:
 TAYLOR, MELISSA
 Name:

 Address:
 210 NE 3RD ST
 Address:

 City-St-Zip:
 BOYNTON BEACH, FL 33435
 City-St-Zip:

Title: S () Delete Title: () Change () Addition

 Name:
 PADALINO, VANESSA
 Name:

 Address:
 210 NE 3RD ST
 Address:

 City-St-Zip:
 BOYNTON BEACH, FL 33435
 City-St-Zip:

Title: D () Delete Title: D (X) Change () Addition

Name: SCHERZER, THOMAS Name: FEICHT, VICKI

 Address:
 210 NE 3RD ST
 Address:
 1500 GATEWAY BLVD, SUITE 220

 City-St-Zip:
 BOYNTON BEACH, FL 33435
 City-St-Zip:
 BOYNTON BEACH, FL 33426

Title: P () Delete Title: () Change () Addition

 Name:
 NELSON, LOUISE
 Name:

 Address:
 650 NE 15 PLACE
 Address:

 City-St-Zip:
 BOYNTON BEACH, FL 33435
 City-St-Zip:

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: LOUISE NELSON PRES 04/07/2009