

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748782

FILED
Mar 06, 2006
Secretary of State

Entity Name: MISTY SPRINGS CONDOMINIUM I ASSOCIATION, INC.

Current Principal Place of Business:

4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 US

New Principal Place of Business:

Current Mailing Address:

4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 US

New Mailing Address:

FEI Number: 59-2037928

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REARDON, MAUREEN C
4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 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: TD () Delete
Name: LOESER, EDWARD
Address: 2681 SABAL SPRINGS CIR. F-104
City-St-Zip: CLEARWATER, FL 33761

Title: PD () Delete
Name: KINNAMAN, JIM
Address: 2681 SABAL SPRINGS CIR #F-105
City-St-Zip: CLEARWATER, FL 33761

Title: SD () Delete
Name: MCKEEVER, VICKI
Address: 2683 SABAL SPRINGS CIR H-204
City-St-Zip: CLEARWATER, FL 33761

Title: VD () Delete
Name: BEALL, RAY
Address: 2682 SABAL SPRING CIR #G-103
City-St-Zip: CLEARWATER, FL 33761

Title: D () Delete
Name: BRANN, NORMA
Address: 2683 SABAL SPRINGS CIR #H-102
City-St-Zip: CLEARWATER, FL 33761

Title: D () Delete
Name: BOYCE, ALLEN
Address: 2673 SABAL SPRINGS CIR. B-205
City-St-Zip: CLEARWATER, FL 33761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: D (X) Change () Addition
Name: CARPENTER, PEGGY
Address: 2683 SABAL SPRINGS CIR. H-106
City-St-Zip: CLEARWATER, FL 33761

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: JIM KINNAMAN

PD

03/06/2006

Electronic Signature of Signing Officer or Director

Date