

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759135

FILED  
Feb 07, 2012  
Secretary of State

**Entity Name:** MILL RIDGE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

429 S NAVY BLVD  
C/O MYHOMESPOT.COM  
PENSACOLA, FL 32507 US

**New Principal Place of Business:**

429 S NAVY BLVD  
PENSACOLA, FL 32507 US

**Current Mailing Address:**

429 S NAVY BLVD  
C/O MYHOMESPOT.COM  
PENSACOLA, FL 32507 US

**New Mailing Address:**

429 S NAVY BLVD  
PENSACOLA, FL 32507 US

FEI Number: 59-2409436

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GLENN DORSEY INC  
429 S NAVY BLVD  
PENSACOLA, FL 32507 US

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

C/O MYHOMESPOT.COM  
429 S NAVY BLVD  
PENSACOLA, FL 32507 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: DAVID DARVILLE

02/07/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: DARVILLE, DAVID  
Address: 4831 E OLIVE RD APT 2A  
City-St-Zip: PENSACOLA, FL 32514

Title: VPD  
Name: ETHELTON, MARY L  
Address: 4831 E OLIVE RD APT 1A  
City-St-Zip: PENSACOLA, FL 32514

Title: T  
Name: HATELY, JEAN  
Address: 4831 E OLIVE ROAD APT 2B  
City-St-Zip: PENSACOLA, FL 32514

Title: S  
Name: WILLIAMS, PAT  
Address: 4831 E OLIVE ROAD APT 2D  
City-St-Zip: PENSACOLA, FL 32514

I hereby 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 all other like empowered.

SIGNATURE: DAVID DARVILLE

PD

02/07/2012

Electronic Signature of Signing Officer or Director

Date