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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 766505

1. Corporation Name
MILLS END COMMUNITY SERVICES ASSOCIATION, INC.

Principal Place of Business NINTH AVE. P.O. BOX 2709 ARCADIA FL 33821 US 34265	Mailing Address NINTH AVE. P.O. BOX 2709 ARCADIA FL 33821 US 34265
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29	3. Date Incorporated or Qualified 01/11/1983	4. FEI Number 59-2852073 Applied For Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
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9. Name and Address of Current Registered Agent BRINSON, JAMES PO BOX 1265 (9TH AVENUE MILLS END) ARCADIA FL 33821	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 300002754909-7 -01/26/99-01043-003 84 City *****51.25 FL 34265
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE P	MCCLAVE, TERRY	<input checked="" type="checkbox"/> DELETE	1.1 TITLE P	BOEHM, FRANK	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1172 SE 9TH AVE		1.2 NAME	ARCADIA, FL 34266	
STREET ADDRESS	ARCADIA FL		1.3 STREET ADDRESS		
CITY-ST-ZIP			1.4 CITY-ST-ZIP		
TITLE SD	LAROCQUE, MARILYN	<input checked="" type="checkbox"/> DELETE	2.1 TITLE SD	BOURDELAIS, EUNICE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1228 SE 9TH AVE		2.2 NAME	ARCADIA, FL 34266	
STREET ADDRESS	ARCADIA FL 34266		2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE TD	BOEHM, FRANK	<input checked="" type="checkbox"/> DELETE	3.1 TITLE TD	BOEHM, JOAN	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1168 SE 8TH AVE		3.2 NAME	ARCADIA, FL 34266	
STREET ADDRESS	ARCADIA FL 34266		3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE VD	ADKINSON, ROGER	<input checked="" type="checkbox"/> DELETE	4.1 TITLE VD	BOURDELAIS, JOANN	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1131 SE 9TH AVE		4.2 NAME	ARCADIA, FL 34266	
STREET ADDRESS	ARCADIA FL 32466		4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE D	DEVINE, VINCENT	<input checked="" type="checkbox"/> DELETE	5.1 TITLE D	BOURDELAIS, HOWIE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1092 SE 8TH AVE		5.2 NAME	ARCADIA, FL 34266	
STREET ADDRESS	ARCADIA FL		5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE D	PEASE, RALPH	<input checked="" type="checkbox"/> DELETE	6.1 TITLE D	BURNS, INA MARIE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	8TH AVE MILLS END		6.2 NAME	ARCADIA, FL 34266	
STREET ADDRESS	ARCADIA FL		6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] DATE: 1/18/99

CR2E037 (11/98)