


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007 8:00 am
Secretary of State

04-16-2007 90093 013 ****61.25

DOCUMENT # 766505					
1. Entity Name MILLS END COMMUNITY SERVICES ASSOCIATION, INC.					
Principal Place of Business NINTH AVE. P.O. BOX 2709 ARCADIA, FL 34265 US			Mailing Address NINTH AVE. P.O. BOX 2709 ARCADIA, FL 34265 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2852073	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
NAUTA, MARILYN 1226 SE 9TH AVE ARCADIA, FL 34266				Name Kathryn Roskey	
				Street Address (P.O. Box Number is Not Acceptable) 1169 SE 8th Ave.	
				City Arcadia	FL Zip Code 34266
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Kathryn Roskey		SIGNATURE Kathryn Roskey		DATE 4-5-07	
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BOURDELAIS, EUNICE 1188 SE 8TH AVE ARCADIA, FL 34266 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Bourdelaais, Eunice 1188 SE 8th Ave Arcadia, FL 34266		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <input checked="" type="checkbox"/> Delete FLEGLE, SHERRY 1219 SE 9TH AVE ARCADIA, FL 34266	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Kathryn Roskey 1169 SE 8th Ave Arcadia, FL 34266		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Delete BONVILLE, GABBY 1219 SE 7TH AVE ARCADIA, FL 34266	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Gail Rayborn SE 9th Ave Arcadia, FL 34266		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Delete BOURDELAIS, JOANNE 1168 SE 8TH AVE ARCADIA, FL 34266	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Ivan Schlaback SE 7th Ave Arcadia, FL 34266		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Delete SUGGS, LINDA 1113 SE 9TH AVE ARCADIA, FL 34266	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Asseneth Divine SE 8th Ave Arcadia, FL 34266		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Delete SUGGS, BUDDY 1113 SE 9TH AVE ARCADIA, FL 34266	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: Kathryn Roskey		SIGNATURE: Kathryn Roskey		Date: 4/5/07 Daytime Phone #: 863-494-5669	