2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#767189

FILED Jan 07, 2005 Secretary of State

Entity Name: OLD MILL RUN HOMEOWNERS' ASSOCIATION, INC.

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

% 15240 SHADY LANE PO BOX 456

TAVARES, FL 32778 4 TAVARES, FL 32778 4

Current Mailing Address: New Mailing Address:

P.O. BOX 456 PO BOX 456

TAVARES, FL 32778 TAVARES, FL 32778

FEI Number: 59-2530439 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:

STEBBINS, WILLIAM
29350 W. OLD MILL ROAD
TAVARES, FL 32778 US

BATSON, DAVID
29142 WEST OLD MILL ROAD
TAVARES, FL 32778 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.

The State Striffing.

SIGNATURE: DAVID BATSON 01/07/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 COPARE, MARGARET
 Name:
 BATSON, DAVID

 Address:
 15240 SHADY LANE
 Address:
 29142 WEST OLD MILL ROAD

 City-St-Zip:
 TAVARES, FL 32778
 City-St-Zip:
 TAVARES, FL 32778

Title: VPD () Delete Title: VPD (X) Change () Addition Name: POLLARD, DENNIS Name: FRICK, TONY

 Address:
 29314 W OLD MILL RD
 Address:
 15027 BREWERS COURT

 City-St-Zip:
 TAVARES, FL 32778
 City-St-Zip:
 TAVARES, FL 32778

Title: SD () Delete Title: SD (X) Change () Addition Name: ETHELL, SHANE Name: VISCONTI, TONY

Address: 15222 GRINDERS GLEN Address: 29143 EAST OLD MILL ROAD

City-St-Zip: TAVARES, FL 32778 City-St-Zip: TAVARES, FL 32778

 Name:
 STEBBIN, BILL
 Name:
 MAIELLO, MARGARET

 Address:
 29350 W. OLD MILL RUN
 Address:
 15010 BREWERS COURT

 City-St-Zip:
 TAVARES, FL 32778
 City-St-Zip:
 TAVARES, FL 32778

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

 Name:
 BLACKSTONE, KATHY
 Name:

 Address:
 29109 E OLD MILL RD
 Address:

 City-St-Zip:
 TAVARES, FL 32778
 City-St-Zip:

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

 Name:
 Name:
 FITZPATRICK, KEVIN

 Address:
 Address:
 15044 DRY RUN

 City-St-Zip:
 City-St-Zip:
 TAVARES, FL 32778

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARGARET MAIELLO TD 01/07/2005