

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 07, 2006 08:00 AM
Secretary of State

DOCUMENT # N01000008259	
1. Entity Name MALLARD WAY COMMERCIAL CONDOMINIUM ASSOCIATION, INC.	

Principal Place of Business 6601 TAYLOR ROAD PUNTA GORDA, FL 33950	Mailing Address 6601 TAYLOR ROAD A PUNTA GORDA, FL 33950
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07312006 No Chg-NP CR2E037 (4/06)

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4. FEI Number 06-1644293	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent OLMSTED, DAVID E 18501 MURDOCK CIRCLE SUITE 101 PORT CHARLOTTE, FL 33948
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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 _____	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	DATE _____
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Filing Fee is \$61.25 Due by September 6, 2006	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	U000000573778 08/07/06-80010-021 61.25
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT BARRY, JOHN F 6601 TAYLOR ROAD PUNTA GORDA, FL 33950
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CREEDEN, ANNA E 2255 EL CERITO COURT PUNTA GORDA, FL 33950
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: <i>John Barry</i> JOHN BARRY	7/28/06	9415758188
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #