

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2006 8:00 am
Secretary of State

02-21-2006 90014 031 ****61.25

DOCUMENT # N01635 1. Entity Name MURRELL VILLAS CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business C/O GJ REAL ESTATE INC. 200 WILLARD STREET, #2-B COCOA VILLAGE, FL 32922			Mailing Address C/O GJ REAL ESTATE INC 200 WILLARD STREET, #2-B COCOA VILLAGE, FL 32922		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		01032006 Chg-NP CR2E037 (11/05)	
Zip		Country		4. FEI Number 59-2367515	
				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	
WEAN & MALCHOW, P.A. 646 EAST COLONIAL DRIVE ORLANDO, FL 32803				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P		TITLE	President	
NAME	JOHNSON, WALTER		NAME	Young, Robert	
STREET ADDRESS	3348 CAPPJO DR		STREET ADDRESS	55 Browside Drive #103	
CITY-ST-ZIP	MELBOURNE, FL 32940		CITY-ST-ZIP	Cocoa, FL 32922-7963	
TITLE	VP		TITLE	Vice-President	
NAME	JOHNSON, PAUL		NAME	Franz, John K.	
STREET ADDRESS	1258 CREEKSIDE CIR		STREET ADDRESS	487 Nancie Avenue	
CITY-ST-ZIP	ROCKLEDGE, FL 32955		CITY-ST-ZIP	Merritt Island, FL 32953	
TITLE	ST		TITLE	Secretary/Treasurer	
NAME	HOCK, TIM		NAME	Hock, Tim	
STREET ADDRESS	1008 DOWITCHER COURT		STREET ADDRESS	1008 Dowitcher Court	
CITY-ST-ZIP	ROCKLEDGE, FL 32955		CITY-ST-ZIP	Rockledge, FL 32955	
TITLE			TITLE		
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE			TITLE		
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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>Robert Young</i> Robert Young			2/16/06 321-639-1111 Ext 11		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		