

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006396

FILED
Apr 30, 2004
Secretary of State

Entity Name: MILLS COVE BOAT RAMP ASSOCIATION, INC.

Current Principal Place of Business:

600 LAKE MILLS ROAD
CHULUOTA, FL 32766

New Principal Place of Business:

Current Mailing Address:

600 LAKE MILLS ROAD
CHULUOTA, FL 32766

New Mailing Address:

FEI Number: 06-1664038

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AXEL, DAVID E
600 LAKE MILLS ROAD
CHULUOTA, FL 32766

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WILLIAMS, LARRY
Address: 800 WESTWOOD SQUARE, SUITE 1400
City-St-Zip: OVIEDO, FL 32765

Title: D () Delete
Name: BIERLY, MICHAEL
Address: 2160 WEST HIGHWAY 434, SUITE 100
City-St-Zip: LONGWOOD, FL 32779

Title: D () Delete
Name: AXEL, DAVID E
Address: 600 LAKE MILLS ROAD
City-St-Zip: CHULUOTA, FL 32766 D

Title: D () Delete
Name: TULP, LOUIS P
Address: P.O. BOX 621024
City-St-Zip: OVIEDO, FL 32762

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BISHOP, WILLIAM L
Address: 850 DYSON DR
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D (X) Change () Addition
Name: BISHOP, W L
Address: 4948 LAKE SHARP DR
City-St-Zip: ORLANDO, FL 32817

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DAVID E. AXEL

D

04/30/2004

Electronic Signature of Signing Officer or Director

Date