

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 10, 2006 08:00 AM
Secretary of State

DOCUMENT # N04000001357

1. Entity Name
TOAD HOLLOW CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**2260 WATERS MILL CIRCLE
RICHMOND, VA 23235**

Mailing Address
**2260 WATERS MILL CIRCLE
RICHMOND, VA 23235**



01192006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
01-0816231

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**LEEBRICK, BRIAN D ESQ.
220 MCKENZIE AVENUE
PANAMA CITY, FL 32401**

**DO NOT WRITE
IN THIS SPACE**

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

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	M
NAME	KEMP, ALAN R
STREET ADDRESS	2260 WATERS MILL CIR
CITY-ST-ZIP	RICHMOND, VA 23235
TITLE	D
NAME	LANG, WALLACE C 111
STREET ADDRESS	104 N RAILROAD AVE
CITY-ST-ZIP	ASHLAND, VA 23005
TITLE	D
NAME	LUSTER, THOMAS C
STREET ADDRESS	12TH ST
CITY-ST-ZIP	APALACHICOLA, FL 32320
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/25/06-80042-003 61.25

**DO NOT WRITE
IN THIS SPACE**

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:

Alan R. Kemp Jr.
ALAN R. KEMP JR.

4-06-06

(804) 320-3270

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #