## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT...

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # N04039**

Entity Name

TRILLIUM COURT HOME OWNERS ASSOCIATION, INC.



FILED Jun 12, 2006 08:00 AN Secretary of State

Principal Place of Business 1

Mailing Address

3532 TRILLIUM COURT TALLAHASSEE, FL 32312 US

3532 TRILLIUM COURT TALLAHASSEE, FL 32312

211



06052006 No Chg-NP

CR2E037 (4/06)

4.	FEI Number
	59-2937089

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6.	Name and Ad	dress of Co	urrent Registere	d Agent

MILLER, DANIEL S. 3532 TRILLIUM CT. TALLAHASSEE, FL

## 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 Signative, typed to ensured national registered agent and the Tappa cape. Bit DTE: Begiatered Agent agent are grown or contributing the DATE.									
D	Filing Fee is \$61.25 ue by September 6, 2006	Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees					
10.	OFFICERS AND DIRE	ECTORS							
TITLE	D								
NAME	ANSLEY, LEIGH H.	1							
STREET ADDRESS	3244 TRILLIUM CT.				U00000566987				
CITY-ST-ZIP	TALLAHASSEE, FL				06/12/06-80003-006 61.25				
TITLE	PD 90								
NAME	MILLER, DANIEL S.								
STREET ADDRESS	3532 TRILLIUM CT.								
CITY-ST-ZIP	TALLAHASSEE, FL								
TITLE	ST								
KAME	••								
STREET ADDRESS	MILLER, REBECCA G.								
CITY-ST-ZIP	SOUZ TRILLION OT.			DO	NOT WRITE				
	TALLAHASSEE, FL								
TITLE				IN	THIS SPACE				
NAME	IN THIS OF AGE								
STREET ADDRESS		•			,				
CITY-ST-ZIF					·				
TITLE									
NAME					·				
STREET ADDRESS									
CHY-SI-ZIP									
TITLE									
NAME									

12. Thereby certify that the information supplied with this filling 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: /

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

S. MILLER

6/7/06

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