2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000161

FILED Apr 29, 2007 Secretary of State

Entity Name: MILLENIUM PARC OWNERS ASSOCIATION, INC.

urrent F	Principal Place of Busine	ess:	New Principal Pla	CE OT BUSINESS:
) BUG LAKE RD. #345 SPRINGS, FL 32708			
Current N	/lailing Address:		New Mailing Addı	ress:
) BUG LAKE RD. #345 SPRINGS, FL 32708			
El Numbe	r: FEI Numb	er Applied For (X)	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	d Address of Current Re	gistered Agent:	Name and Addres	s of New Registered Agent:
:015 W. S	N, REINHARD G ESQ. 3.R. 434 DOD, FL 32779 US			
	e named entity submits this e of Florida.	s statement for the p	purpose of changing its registe	ered office or registered agent, or both,
n the Stat	e of Florida.	s statement for the p	purpose of changing its registe	ered office or registered agent, or both,
the Stat	e of Florida. RE:	s statement for the property of Registered Ag		ered office or registered agent, or both, Date
n the Stat SIGNATU	e of Florida. RE:		ent	
n the Stat	e of Florida. RE: Electronic Signatur		ent	Date
of the State of th	e of Florida. RE: Electronic Signatur S AND DIRECTORS: PTD () Delete QUAID, RICHARD 2059 WOODLAWN DR.		ent ADDITIONS/CHAN Title: Name: Address:	Date NGES TO OFFICERS AND DIRECTOR
the State of the S	Electronic Signatur Electronic Signatur S AND DIRECTORS: PTD () Delete QUAID, RICHARD 2059 WOODLAWN DR. ORLANDO, FL 32803 D () Delete QUAID, TOMMIE 2059 WOODLAWN DR.	re of Registered Ag	ent ADDITIONS/CHAN Title: Name: Address: City-St-Zip: Title: Name: Address:	Date NGES TO OFFICERS AND DIRECTOR () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: RICHARD QUAID P 04/29/2007