

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001421

FILED  
Mar 16, 2006  
Secretary of State

**Entity Name:** MEDITERRANEAN CONDOMINIUM ASSOCIATION OF VOLUSIA COUNTY, INC.

**Current Principal Place of Business:**

4690 LIPSCOMB ST. N.E. STE 5  
PALM BAY, FL 32905

**New Principal Place of Business:**

711 SOUTH ATLANTIC AVENUE  
NEW SMYRNA BEACH, FL 32169

**Current Mailing Address:**

4690 LIPSCOMB ST. N.E. STE 5  
PALM BAY, FL 32905

**New Mailing Address:**

711 SOUTH ATLANTIC AVENUE  
NEW SMYRNA BEACH, FL 32169

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

FROST, CINDY  
711 SOUTH ATLANTIC AVENUE  
NEW SMYRNA BEACH, FL 32169 US

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: CINDY FROST

03/16/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: DOROUGH, JOHN  
Address: 4690 LIPSCOMB ST. N.E. STE. 5  
City-St-Zip: PALM BAY, FL 32905

Title: VDP ( ) Delete  
Name: DOROUGH, HOWARD  
Address: 4690 LIPSCOMB ST. N.E. STE. 5  
City-St-Zip: PALM BAY, FL 32905

Title: SD ( ) Delete  
Name: HERRING, ANGELA  
Address: 4690 LIPSCOMB ST. N.E. STE. 5  
City-St-Zip: PALM BAY, FL 32905

Title: TD ( ) Delete  
Name: COX, DALE L  
Address: 4690 LIPSCOMB ST. N.E. STE. 5  
City-St-Zip: PALM BAY, FL 32905

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: ATKINS, JOHN  
Address: 711 SOUTH ATLANTIC AVENUE, #503  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: VPD (X) Change ( ) Addition  
Name: ZIMMERMAN, MICHAEL  
Address: 8102 EDGEWARE LANE  
City-St-Zip: LOUISVILLE, KY 40220

Title: SD (X) Change ( ) Addition  
Name: SIMMONS, PAMELA  
Address: 450 SOUTH TIMBERLANE DRIVE  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: TD (X) Change ( ) Addition  
Name: PETERS, KATHY  
Address: 30981 PINE CONE DRIVE  
City-St-Zip: FARMINGTON HILLS, MI 48331

I hereby certify that the information supplied with this filing does not qualify for the 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: CINDY FROST

MGR

03/16/2006

Electronic Signature of Signing Officer or Director

Date