

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001654

FILED
Jul 31, 2007
Secretary of State

Entity Name: MILL CREEK RIDGE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

11951 MICCOSUKEE RD.
TALLAHASSEE, FL 32309

New Principal Place of Business:

501 RIVERSIDE AVENUE
SUITE 902
JACKSONVILLE, FL 32202

Current Mailing Address:

11951 MICCOSUKEE RD.
TALLAHASSEE, FL 32309

New Mailing Address:

501 RIVERSIDE AVENUE
SUITE 902
JACKSONVILLE, FL 32202

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WARD, CHARLES M. II
11951 MICCOSUKEE RD.
TALLAHASSEE, FL 32309 US

Name and Address of New Registered Agent:

STARLING, STACY
1428 SAN MATEO AVENUE
JACKSONVILLE, FL 32207 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: STACY STARLING

07/31/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WARD, CHARLES M. II
Address: 11951 MICCOSUKEE RD.
City-St-Zip: TALLAHASSEE, FL 32309

Title: D () Delete
Name: CRUCE, JOHN
Address: 407 GLENRIDGE RD.
City-St-Zip: PERRY, FL 32348

Title: D () Delete
Name: HETTINGER, MIKE
Address: 1205 EQUESTRIAN WAY
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DAHL, JAMES H
Address: 501 RIVERSIDE AVENUE, SUITE 902
City-St-Zip: JACKSONVILLE, FL 32202

Title: D (X) Change () Addition
Name: CAHOON, ARTHUR L
Address: 501 RIVERSIDE AVENUE, SUITE 902
City-St-Zip: JACKSONVILLE, FL 32202

Title: D (X) Change () Addition
Name: HUDSON, ASHTON
Address: 501 RIVERSIDE AVENUE, SUITE 902
City-St-Zip: JACKSONVILLE, FL 32202

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: STACY STARLING

RA

07/31/2007

Electronic Signature of Signing Officer or Director

Date