

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008445

FILED
May 02, 2007
Secretary of State

Entity Name: MITCHELL SQUARE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

10080 BUCK POINT ROAD
TALLAHASSEE, FL 32312

New Principal Place of Business:

Current Mailing Address:

10080 BUCK POINT ROAD
TALLAHASSEE, FL 32312

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **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:

Name and Address of New Registered Agent:

WORLEY, MARK
10080 BUCK POINT ROAD
TALLAHASSEE, FL 32312 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WORLEY, MARK
Address: 10080 BUCK POINT ROAD
City-St-Zip: TALLAHASSEE, FL 32312

Title: VPD () Delete
Name: WORLEY, RAMONA
Address: 10080 BUCK POINT ROAD
City-St-Zip: TALLAHASSEE, FL 32312

Title: SD () Delete
Name: HALL, PRESTON
Address: 2065 THOMASVILLE RD
City-St-Zip: TALLAHASSEE, FL 32308

Title: T () Delete
Name: WORLEY, AMBER
Address: 10080 BUCK POINT ROAD
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MARK S. WORLEY

PD

05/02/2007

Electronic Signature of Signing Officer or Director

Date