

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09731

FILED
Jan 20, 2009
Secretary of State

Entity Name: MIL-LAKE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

11924 FOREST HILL BLVD.
SUITE 22, 111
WELLINGTON, FL 33414

New Principal Place of Business:

Current Mailing Address:

11924 FOREST HILL BLVD.
SUITE 22, 111
WELLINGTON, FL 33414

New Mailing Address:

FEI Number: 59-2517552 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHILDERS, AMBER
131 ALCAZAR ST
WEST PALM BEACH, FL 33411 US

Name and Address of New Registered Agent:

FLORES, CAROLYN PRES.
3769 MIL-POND COURT
GREENACRES, FL 33463 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: CAROLYN FLORES

01/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: BARROW, MARTIN
Address: 3772 MIL POND CT
City-St-Zip: LAKE WORTH, FL 33463

Title: D () Delete
Name: ODOM, REGINA
Address: 3788 MIL-POND COURT
City-St-Zip: GREENACRES, FL 33463

Title: D () Delete
Name: SALDIVAR, FRANCISCO
Address: 3785 MIL LAKE CT.
City-St-Zip: GREENACRES, FL 33463

Title: P (X) Delete
Name: FLORES, CAROLYN
Address: 3769 MIL-POND COURT
City-St-Zip: GREENACRES, FL 33463

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: FLORES, CAROLYN PRES
Address: 3769 MIL POND CT
City-St-Zip: GREENACRES, FL 33463

Title: D (X) Change () Addition
Name: ODOM, REGINA
Address: 3766 MIL-POND COURT
City-St-Zip: GREENACRES, FL 33463

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: CAROLYN FLORES

PRES

01/20/2009

Electronic Signature of Signing Officer or Director

Date