

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12835

**FILED**  
**Jan 06, 2012**  
**Secretary of State**

**Entity Name:** MIMS PLANTATION HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

34 GILCREASE LANE  
QUINCY, FL 32351 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 724  
QUINCY, FL 32353 US

**New Mailing Address:**

**FEI Number:** 59-2690801

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DUROCHER, ROBERT  
34 GILCREASE LANE  
QUINCY, FL 32351 US

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

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  
Name: DUROCHER, ROBERT  
Address: 34 GILCREASE LANE  
City-St-Zip: QUINCY, FL 32351

Title: VD  
Name: CUTRER, GAIL  
Address: 12 GILCREASE LANE  
City-St-Zip: QUINCY, FL 32351

Title: STD  
Name: DUROCHER, NANCY  
Address: 34 GILCREASE LN  
City-St-Zip: QUINCY, FL 32351

I hereby 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 all other like empowered.

**SIGNATURE:** ROBERT DUROCHER

PD

01/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date