

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15211

FILED
Jan 26, 2010
Secretary of State

Entity Name: MILLPOND TRACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O SEABOARD ARBORS
2189 CLEVELAND ST STE 225
CLEARWATER, FL 33765 US

New Principal Place of Business:

Current Mailing Address:

C/O SEABOARD ARBORS
2189 CLEVELAND ST STE 225
CLEARWATER, FL 33765 US

New Mailing Address:

FEI Number: 59-2779001

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEIGHTON, LENNARD A
2189 CLEVELAND STREET STE 225
CLEARWATER, FL 33765 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: BURTT, ROBERT
Address: 7900 HARDWICK DR #811
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: STD
Name: PERLEY, LILLIAN
Address: 7828 HARDWICK DRIVE #911
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: VD
Name: OHLERT, VINCENT
Address: 7900 HARDWICK DR., #814
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: D
Name: ABATE, BARBARA
Address: 7828 HARDWICK DRIVE, #912
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: D
Name: TERRI, WHEELER
Address: 7828 HARDWICK DRIVE, #924
City-St-Zip: NEW PORT RICHEY, FL 34653

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 BURTT

PRES

01/26/2010

Electronic Signature of Signing Officer or Director

Date