

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17275

FILED
Mar 21, 2006
Secretary of State

Entity Name: MILL POND CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4400 NW 36TH AVE
GAINESVILLE, FL 32606 US

New Principal Place of Business:

200 NW 48TH BLVD
GAINESVILLE, FL 32607 US

Current Mailing Address:

4400 NW 36TH AVE
GAINESVILLE, FL 32606 US

New Mailing Address:

C/O ACTION REAL ESTATE SERVICE
6110-B NW 1ST PL
GAINESVILLE, FL 32607 US

FEI Number: 59-2890277

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRIPPE, PAT
4400 NW 36TH AVE
GAINESVILLE, FL 32606 US

Name and Address of New Registered Agent:

SAUSAMAN, D. JEFFREY
C/O ACTION REAL ESTATE SERVICES
6110-B NW 1ST PL
GAINESVILLE, FL 32607 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: D. JEFFREY SAUSAMAN

03/21/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: 2V () Delete
Name: AMUNDSON, YVONNE
Address: 4825 NW 2ND PLACE
City-St-Zip: GAINESVILLE, FL 32607

Title: DS () Delete
Name: SPITZLER, JULIA B
Address: 35 NW 48TH BLVD
City-St-Zip: GAINESVILLE, FL 32607

Title: 1V () Delete
Name: DEBONO, MARIE
Address: 11 NW 48 BLVD
City-St-Zip: GAINESVILLE, FL 32607

Title: T () Delete
Name: DAVIS, DEBRA
Address: 351 NW 50 BLVD
City-St-Zip: GAINESVILLE, FL 32607

Title: PD () Delete
Name: HANEL, HARRY
Address: 309 NW 48 BLVD
City-St-Zip: GAINESVILLE, FL 32607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DS (X) Change () Addition
Name: FINLEY, CLAUDETTE
Address: 325 NW 48TH BLVD
City-St-Zip: GAINESVILLE, FL 32607

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

Title: D (X) Change () Addition
Name: WILLIAMS, PATRICIA
Address: 437 NW 48 BLVD
City-St-Zip: GAINESVILLE, FL 32607

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

I hereby certify that the information supplied with this filing does not qualify for the 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: HARRY HANEL

P

03/21/2006

Electronic Signature of Signing Officer or Director

Date