

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22127

FILED
Mar 23, 2007
Secretary of State

Entity Name: MIRASOL TOWNHOME OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

255 BLUE MOUNTAIN ROAD
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

Current Mailing Address:

C/O NIKKI SMALLWOOD
120 VICKERY STREET, ROOM 102
HEFLIN, AL 36264

New Mailing Address:

FEI Number: 59-2695612 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PRICE, KEN
713 PINEWOOD DRIVE
DEFUNIAK SPRINGS, FL 23433 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 () Delete
Name: PRICE, KEN
Address: 713 PINEWOOD DRIVE
City-St-Zip: DEFUNIAK SPRINGS, FL 23433

Title: DST () Delete
Name: SMALLWOOD, NIKKI
Address: 8777 HWY 78TH E
City-St-Zip: HEFLIN, AL 36264

Title: DV () Delete
Name: TAYLOR, SUE
Address: 4622 COUNTY RD 13
City-St-Zip: HEFLIN, AL 36264

Title: DV () Delete
Name: PRICE, CARL
Address: 735 SILBA HOPE RD.
City-St-Zip: SILER CITY, NC 27344

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 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: NIKKI OWEN SMALLWOOD

DST

03/23/2007

Electronic Signature of Signing Officer or Director

Date