

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N23905

1. Entity Name

MCMILLAN MANOR HOMEOWNERS ASSOCIATION, INC.

FILED

Jul 25, 2000 8:00 am
Secretary of State

06-27-2000 90005 036 ****61.25

Principal Place of Business

1020 E JORDAN ST
BOX #4
PENSACOLA FL 32503
US

Mailing Address

1020 E JORDAN ST
BOX #4
PENSACOLA FL 32503
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2945825

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BERRY, BONNIE
1020 E JORDAN ST
UNIT I
PENSACOLA FL 32503

Name

Parry Malone

Street Address (P.O. Box Number is Not Acceptable)

1020 E Jordan St

Unit K

City

Pensacola

FL

Zip Code

32503

8. 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

Parry Malone Parry Malone President 7/21/00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

After September 13, 2000 min. will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME BERRY, BONNIE
STREET ADDRESS 1020 E JORDAN ST UNIT I
CITY-ST-ZIP PENSACOLA FL 32503 ☐ Delete

TITLE Parry malone
NAME 1020 E Jordan St. Unit K
STREET ADDRESS Pensacola
CITY-ST-ZIP PD ☐ Change ☐ Addition

TITLE VPD
NAME LOWE-EVANS, MARY
STREET ADDRESS 1020 E JORDAN ST UNIT H
CITY-ST-ZIP PENSACOLA FL 32503 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE TD
NAME JERGE, SUSAN
STREET ADDRESS 1020 E JORDAN ST UNIT J
CITY-ST-ZIP PENSACOLA FL 32503 ☒ Delete

TITLE Bonnie Berry
NAME 1020 E Jordan Unit I
STREET ADDRESS Pensacola, FL 32503
CITY-ST-ZIP TD ☐ Change ☐ Addition

TITLE S
NAME HATFIELD, DIANE
STREET ADDRESS 1020 E JORDAN UNIT N
CITY-ST-ZIP PENSACOLA FL 32503 ☒ Delete

TITLE Patty Hawkins
NAME 1020 E Jordan Unit O
STREET ADDRESS Pensacola, FL 32503
CITY-ST-ZIP S ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Parry Malone Parry Malone 7/21/00 850 410-9663

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (5/00)

2000 UNIFORM BUSINESS REPORT (UBR)

6/27/00-90005-036-\$61.25-\$61.25

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Principal Place of Business

Mailing Address

1020 E JORDAN ST
BOX #4
PENSACOLA FL 32503
US

1020 E JORDAN ST
BOX #4
PENSACOLA FL 32503-4700
US

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3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2945825

Applied For

Not Applicable

Zip

Country

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Fee Required

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7. Name and Address of New Registered Agent

BERRY, BONNIE
1020 E JORDAN ST
UNIT I
PENSACOLA FL 32503

Name Parry Malone
Street Address (P.O. Box Number Not Acceptable)
1020 E. Jordan St.
Unit K
City Pensacola FL 32503

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☐

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Department of State

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME BERRY, BONNIE
STREET ADDRESS 1020 E JORDAN ST UNIT I
CITY-ST-ZIP PENSACOLA FL 32503

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VPD ☐ Delete
NAME LOWE-EVANS, MARY
STREET ADDRESS 1020 E JORDAN ST-UNIT H
CITY-ST-ZIP PENSACOLA FL 32503

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☐ Delete
NAME JERGE, SUSAN
STREET ADDRESS 1020 E JORDAN ST UNIT J
CITY-ST-ZIP PENSACOLA FL 32503

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☐ Delete
NAME HATFIELD, DIANE
STREET ADDRESS 1020 E JORDAN UNIT N
CITY-ST-ZIP PENSACOLA FL 32503

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Attachment

308758

DO NOT WRITE IN THIS SPACE

CR2E037 (9/99)