


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**

**Jan 09, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N23905</b>	
1. Entity Name <b>MCMILLAN MANOR HOMEOWNERS ASSOCIATION, INC.</b>	

Principal Place of Business <b>1020 E JORDAN ST BOX #4 PENSACOLA, FL 32503 US</b>	Mailing Address <b>1020 E JORDAN ST BOX #4 PENSACOLA, FL 32503 US</b>
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01052006 No Chg-NP CR2E037 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-2945825</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>GIRARDIN, DANIEL 1020 E JORDAN ST UNIT C PENSACOLA, FL 32503</b>
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**DO NOT WRITE  
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

<b>Filing Fee is \$61.25 Due by May 1, 2006</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GIRARDIN, DANIEL 1020 E JORDAN STREET, UNIT C PENSACOLA, FL 32503
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DORSEY, MARJORIE J 1020 E JORDAN ST UNIT A PENSACOLA, FL 32503
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD THATCHER, DAVID J 1020 E. JORDAN STREET, UNIT A PENSACOLA, FL 32503
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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01/11/06-80014-020 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: David Thatcher David Thatcher Jan 5, 06 850-432-5423  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #