

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23905

FILED
Mar 25, 2009
Secretary of State

Entity Name: MCMILLAN MANOR HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1020 E JORDAN ST
BOX #4
PENSACOLA, FL 32503 US

New Principal Place of Business:

Current Mailing Address:

1020 E JORDAN ST
BOX #4
PENSACOLA, FL 32503 US

New Mailing Address:

FEI Number: 59-2945825

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIRARDIN, DANIEL
1020 E JORDAN ST
UNIT C
PENSACOLA, FL 32503 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: GIRARDIN, DANIEL
Address: 1020 E JORDAN STREET, UNIT C
City-St-Zip: PENSACOLA, FL 32503

Title: SD () Delete
Name: DORSEY, MARJORIE J
Address: 1020 E JORDAN ST UNIT A
City-St-Zip: PENSACOLA, FL 32503

Title: TD () Delete
Name: THATCHER, DAVID J
Address: 1020 E. JORDAN STREET, UNIT A
City-St-Zip: PENSACOLA, FL 32503

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change () Addition
Name: DUNLAP, BETH W
Address: 1020 E JORDAN ST UNIT D
City-St-Zip: PENSACOLA, FL 32503

Title: SD (X) Change () Addition
Name: BONNIE, BERRY
Address: 1020 E. JORDAN STREET UNIT I
City-St-Zip: PENSACOLA, FL 32503

I hereby certify that the information supplied with this filing does not qualify 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: BETH W DUNLAP

TD

03/25/2009

Electronic Signature of Signing Officer or Director

Date