

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Feb 19, 2007 08:00 AM
Secretary of State

DOCUMENT # N23905

1. Entity Name
MCMILLAN MANOR HOMEOWNERS ASSOCIATION, INC.



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



01062007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2945825

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

GIRARDIN, DANIEL
1020 E JORDAN ST
UNIT C
PENSACOLA, FL 32503

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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 _____

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution... ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	GIRARDIN, DANIEL
STREET ADDRESS	1020 E JORDAN STREET, UNIT C
CITY-ST-ZIP	PENSACOLA, FL 32503
TITLE	SD
NAME	DORSEY, MARJORIE J
STREET ADDRESS	1020 E JORDAN ST UNIT A
CITY-ST-ZIP	PENSACOLA, FL 32503
TITLE	TD
NAME	THATCHER, DAVID J
STREET ADDRESS	1020 E. JORDAN STREET, UNIT A
CITY-ST-ZIP	PENSACOLA, FL 32503
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000642529
03/01/07-80038-010 61.25

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IN THIS SPACE**

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 J Thatcher David J Thatcher Feb 15, 07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #