2008 NOT-FOR-PROFIT CORPORATION

FILED Apr 11, 2008 8:00 am Secretary of State

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DOCUMENT # N33403 MILL RUN HOMEOWNERS' ASSOCIATION, INC. Principal Place of Business Mailing Address **GRANT PROPERTY MANAGEMENT GRANT PROPERTY MANAGEMENT** 1599 NW 9TH AVE, SUITE 2 1599 NW 9TH AVE, SUITE 2 BOCA RATON, FL 33486 BOCA RATON, FL 33486 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03132008 Cha-NP CR2E037 (12/06) City & State Applied For City & State 4. FEI Number 65-0164871 Not Applicable Country \$8,75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ROBERT KAYE & ASSOC. PA Street Address (P.O. Box Number is Not Acceptable) 6261 NW 6TH WAY STE 103 FORT LAUDERDALE, FL 33309 City Zip Code FI 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) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2008 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ת TITLE ☐ Delete TITLE ☐ Change X Addition Lascano, Marhea 6670 NW 76 Court NAME DEGRUCCIO, GEORGE NAME STREET ADORESS 6200 NW 77 PLACE STREET ADDRESS Parkland, FL 33067 CITY-ST-7IP PARKLAND, FL 33067 CITY-ST-ZIP ☐ Delete ☐ Change Addition BRUNEEL KEVIN NAME NAME 7701 NW 61 TERRACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PARKLAND, FL 33067 CITY-ST-ZIP TITLE ☐ Addition TITLE Delete Change GREEN, DAVID NAME STREET ADDRESS 6200 NW 76 COURT STREET ADDRESS CITY-ST-ZIP PARKLAND, FL 33067 CITY-SI-ZIP TITLE Delete ■ Addition SOHL, WILLIAM NAME NAME 6235 NW 77 PLACE STREET ADDRESS STREET ADDRESS CITY-S1-ZIP CITY-ST-ZIP PARKLAND, FL 33067 TITLE Delete Change Addition NAME HUCKLEBERRY, JENNIFER E MAME 7650 NW 61 AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PARKLAND, FL 33067 CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition HUBER, PAUL J NAME NAME STREET ADDRESS 7685 NW 61 TERRACE STREET ADDRESS CITY-S1-ZIP CITY-ST-ZIP PARKLAND, FL 33067 12. Thereby certify that the information supplied with this filling does not quality 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