

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34940

FILED
Feb 12, 2012
Secretary of State

Entity Name: MILLPOND LAKES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4575 WHITTON WAY
#1128
NEW PORT RICHEY, FL 34653

New Principal Place of Business:

7143 SR 54
#275
NEW PORT RICHEY, FL 34653 UN

Current Mailing Address:

% TRADEMARK CAPITAL
5328 TROUBLE CREEK RD
NEW PORT RICHEY, FL 34652

New Mailing Address:

FEI Number: 59-2977364 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CARTER, CAROLYN S
5328 TROUBLE CREEK RD
NEW PORT RICHEY, FL 34652 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
Name: DEVENNY, DALLAS
Address: 4529 WHITTON WAY #222
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: VPD
Name: WALSH, DORIS
Address: 4421 WHITTON WAY
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: TD
Name: THACKER, JANE
Address: 4575 WHITTON WAY #1118
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: D
Name: HERRMANN, MARY
Address: 4515 WHITTON WAY #124
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: D
Name: PORCARO, JOSEPHINE
Address: 4575 WHITTON WAY #1124
City-St-Zip: NEW PORT RICHEY, FL 34653

I hereby 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 all other like empowered.

SIGNATURE: DALLAS DEVENNY

PD

02/12/2012

Electronic Signature of Signing Officer or Director

Date