2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35558

FILED Jan 13, 2006 Secretary of State

Entity Name: SIX MILE CREEK SUBDIVISION HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Place of Business:
	DLING AVENUE RNE, FL 32935	US	645 CLASSIC COURT SUITE 104 VIERA, FL 32940 US
Current Mailing Address:			New Mailing Address:
	DLING AVENUE RNE, FL 32935	US	645 CLASSIC COURT SUITE 104 VIERA, FL 32940 US
FEI Number	: 59-2989010	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()
Name and	d Address of Cu	rrent Registered Agent:	Name and Address of New Registered Agent:
MARRS, KEVIN 1617 COOLING AVENUE MELBOURNE, FL 32935 US			KUEPPERS, CAROL 645 CLASSIC COURT SUITE 104 VIERA, FL 32940 US
	e named entity su e of Florida.	bmits this statement for the	purpose of changing its registered office or registered agent, or both
SIGNATURE: CAROL KUEPPERS			01/13/2006
	Electronic	Signature of Registered Ag	gent Date
OFFICER	S AND DIRECT	ORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECT
Fitle: Name: Address: City-St-Zip:	PD () D REYNOLDS, WIL 2023 THESY DRI VIERA, FL 32940	VE	Title: () Change () Addition Name: Address: City-St-Zip:
Title:	DAL () D FRANKENFIELD,		Title: () Change () Addition Name: Address:
Name: Name: Address: City-St-Zip:	1913 JACQUES E VIERA, FL 32940		City-St-Zip:
Name: Nddress:	VIERA, FL 32940	OUS Pelete E VE	City-St-Zip: Title: ST (X) Change () Addition Name: KUEPPERS, CAROL Address: 645 CLASSIC COURT SUITE 104 City-St-Zip: VIERA, FL 32940 US

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM J. REYNOLDS PD 01/13/2006