

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 10, 2006 8:00 am**  
**Secretary of State**

04-10-2006 90332 042 \*\*\*\*61.25

**DOCUMENT # N36834**



1. Entity Name  
**MISTY OAKS HOMEOWNERS ASSOCIATION, INC.**

Principal Place of Business  
**333 OAK LEAF CIR  
LAKE MARY, FL 32746 US**

Mailing Address  
**333 OAK LEAF CIRCLE  
LAKE MARY, FL 32746**



2. Principal Place of Business

3. Mailing Address

01102006 Chg-NP CR2E037 (11/05)

4. FEI Number  
**59-2998506**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GRIMMS, THOMAS  
357 OAK LEAF CIRCLE  
LAKE MARY, FL 32746**

Name **Dawn Pavlik**  
Street Address (P.O. Box Number is Not Acceptable)  
**343 Oak Leaf Circle**  
City **Lake Mary** FL Zip Code **32746**

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 *Dawn M. Pavlik*

*Dawn M. Pavlik*

*4/4/06*

**Filing Fee is \$61.25  
Due by May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P RAE, ROM 361 OAK LEAF CIRCLE LAKE MARY, FL 32746	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V FRAME, DAVID 307 OAK LEAF CIR LAKE MARY, FL 32746	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T SCOTT, THOMAS E 317 OAK LEAF CIR LAKE MARY, FL 32746	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S GRIMMS, THOMAS J 357 OAK LEAF CIRCLE LAKE MARY, FL 32746	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VL FLANAGAN, BILL 306 OAK LEAF CIRCLE LAKE MARY, FL 32746	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P RAE, TOM 361 Oak Leaf Circle Lake Mary, FL 32746	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VA Deivy, Steve 341 Oak Leaf Circle Lake Mary, FL 32746	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T Grimms, Thomas 357 Oak Leaf Circle Lake Mary, FL 32746	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S Pavlik, Dawn 343 Oak Leaf Circle Lake Mary, FL 32746	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 *Dawn M. Pavlik, Sec.* *4/4/06*