

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38701

FILED  
Jul 04, 2007  
Secretary of State

Entity Name: MICCOSUKEE WOODS HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

9178 RAVENA ROAD  
TALLAHASSEE, FL 32309 US

**New Principal Place of Business:**

**Current Mailing Address:**

9178 RAVENA ROAD  
TALLAHASSEE, FL 32309 US

**New Mailing Address:**

FEI Number: 59-3113202      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

BECKER, CRIS  
9178 RAVENA ROAD  
TALLAHASSEE, FL 32309 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 ( ) Delete  
Name: BECKER, ROBERT J JR.  
Address: 9178 RAVENA ROAD  
City-St-Zip: TALLAHASSEE, FL 32309 US

Title: TD ( ) Delete  
Name: BECKER, CRIS  
Address: 9178 RAVENA ROAD  
City-St-Zip: TALLAHASSEE, FL 32309 US

Title: VPD ( ) Delete  
Name: LOWERY, JOSHUA  
Address: 4210 CLEARVIEW COURT  
City-St-Zip: TALLAHASSEE, FL 32309 US

Title: SD ( ) Delete  
Name: KNOWLTON, TERRY  
Address: 9123 RAVENA ROAD  
City-St-Zip: TALLAHASSEE, FL 32309 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: BRIJBASI, MONIQUE  
Address: 4201 STONEY POINTE DRIVE  
City-St-Zip: TALLAHASSEE, FL 32309 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: CRIS BECKER

TD

07/04/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date