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NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N39269

1. Corporation Name

MILLS BAYOU HOMEOWNER'S ASSOCIATION, INC.

Principal Place of Business C/O GOMEZ. LUIS 3364 MILLS BAYOU DR MILTON FL 32583 US

Mailing Address

C/O GOMEZ. LUIS 3364 MILLS BAYOU DRIVE 3364 MILLS BAYON DR MILTON FL 32583

FILED Mar 11, 1999 8:00 am § Secretary of State

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2. Principal Pl	pal Place of Business 2a. Mailing Address						Date Incorporated or Qual 07/23/1990	ifed		
21		26					· · · · · · · · · · · · · · · · · · ·			
Suite, Apt. :	#, etc.	<u></u>	Suite, Apt. #, etc.				4. FEI Number 59-3021244		<u> </u>	olied For
22		27					39-302 1244			Applicable
City & State	9	28	City & State				5. Certifcate of Status Desire	d 🗆	\$8.75 A	
Zip				Country			6. Election Campaign Finance	ing 🖂	\$5.00	May Be
24	25 29 30			o]			Trust Fund Contribution		Added to	Fees
	9. Name and Address of Current	Regis	tered Agent				10. Name and Address of N	ew Register	ed Agent	
				81	Name	•			•	
WILLMON	HENDY			82	Ctron	4 A didoo	on /B O. Boy Number is Not Acc	ontable)		
	.S BAYOU DR			82	Stree	i Addre:	ss (P.O. Box Number is Not Acc	æptavie)		
MILTON F				83					· · · ·	
METON	2 02000			84	City			1,11	85 Zip C	ode
]			· · ·	•L	
office or re	to the provisions of Sections 617.0502 agistered agent, or both, in the State of m familiar with, and accept the obligation	Florid	la. Such change was auth	orized by	the cor	d corpor poration	ration submits this statement for 's board of directors. I hereby a	the purpose ccept the ap	of changing its pointment as reg	registered ristered
SIGNATURE										
	Signature, typed or printed name of registered agent a			<u></u> -	nt signatur	beriuper e	when reinstating)	DATE		36 IN 12
12.	OFFICERS AND	DIRE		13.			ADDITIONS/CHANGES TO	OFFICERS	Change	Addition
TITLE	PD		☐ DELETE	1.1 TITLE					☐ Citange	1 Addition
NAME	GOMEZ, LUIS									ŀ
STREET ADDRESS	ss 3364 MILLS BAYOU DR			1.3 STREET	TADORES	s				ŧ
CITY-ST-ZIP	1 M 1 M 1 M 1 M 1 M 1 M 1 M 1 M 1 M 1 M			1.4 CITY-S	T-ZIP					
TITLE				2.1 TITLE					Change	Addition
NAME	MARTIN, NANCY L			2.2 NAME						•
STREET ADDRESS	3304 MILLS BAYOU DR			2.3 STREET	TADDRES	s				1
CITY-ST-ZIP	MILTON FL 32583			2. 4 CITY-5	T-7IP					ļ
TITLE	VD DELETE 3					_			☐ Change	Addition
NAME	HAZUCHA, PAUL C			3,2 NAME						
STREET ADDRESS	3304 MILLS BAYOU DR			3.3 STREE	TANOPES					
	MILTON FL 32583			3.4, CITY-5						}
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NAME			<u></u>	4. 2 NAME				_		-
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				5.2 NAME		1		1	_ •	
NAME STREET AGGREGE				5.3 STREET	ADDRES	s	•			
STREET ADDRESS				5.4 CITY-S						Ì
CITY-ST-ZIP TITLE			☐ DELETE	6.1 TITLE	-	+	<u></u>		☐ Change	Addition
			_,	6.2 NAME						
NAME			į	6.3 STREE	TADODES	ا				1
STREET ADDRESS						1	•			{
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I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: