

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 11, 2006 8:00 am
Secretary of State

07-11-2006 90021 032 ****61.25

DOCUMENT # N41082 1. Entity Name MONTCLAIR PARK FAIRWAY ESTATE HOMES ASSOCIATION, INC.			
Principal Place of Business 1403 GLEN EAGLE BLVD NAPLES, FL 34104 US		Mailing Address 6730 HARWICH COURT NAPLES, FL 34104 US	
2. Principal Place of Business 1403 Glen Eagle Blvd. Suite, Apt. #, etc.		3. Mailing Address 1403 Glen Eagle Blvd. Suite, Apt. #, etc.	
City & State NAPLES Florida		City & State NAPLES Florida	
Zip 34104	Country Collier	Zip 34104	Country Collier
6. Name and Address of Current Registered Agent KRAUS & BALLENGER, P.A. 1072 GOODLETTE ROAD NAPLES, FL 34102			
7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____			
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	VD MILLER, DONALD 731 PRINCETOWN DRIVE NAPLES, FL 34104 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT MILLER, DONALD 731 PRINCETOWN DR. NAPLES, FL. 34104 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HURRAY, JOHN S 687 PROVINCE TOWN DRIVE NAPLES, FL 34104 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE-PRESIDENT POPP, SANDY 6745 HARWICH CT. NAPLES, FL. 34104 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DAHLSTROM, BEVERLY 737 PROVINCE TOWN DRIVE NAPLES, FL 341048746 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY DAHLSTROM, BEVERLY 737 PRINCETOWN DR. NAPLES, FL. 34104 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MACDONALD, ENID N 6730 HARWICH COURT NAPLES, FL 341048705 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER DAHLSTROM, WAYNE 737 PRINCETOWN DR NAPLES, FL 34104 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MACDONALD, NOLAN 6730 HARWICH COURT NAPLES, FL 34104 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT WARREN, FRED 788 PRINCETOWN DR NAPLES, FL. 34104 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	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: <i>Donald A. Miller</i> DONALD A MILLER <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<i>July 4, 2006</i> 239-455-3144 <small>Date Daytime Phone #</small>	

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01072006 Chg-NP CR2E037 (11/05)

4. FEI Number
65-0232568 Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**