

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49982

FILED  
Mar 29, 2006  
Secretary of State

Entity Name: THE DUCKPOND NEIGHBORHOOD ASSOCIATION, INC.

## Current Principal Place of Business:

703 N. MAIN STREET  
SUITE C  
GAINESVILLE, FL 32601 US

## New Principal Place of Business:

## Current Mailing Address:

P O BOX 233  
GAINESVILLE, FL 32601 US

## New Mailing Address:

P O BOX 233  
GAINESVILLE, FL 326020233 US

FEI Number: 59-3129037

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCPHERSON, JOHN  
703 N. MAIN STREET  
SUITE C  
GAINESVILLE, FL 32601 US

## Name and Address of New Registered Agent:

WARREN, ROBERT  
703 N. MAIN STREET  
SUITE C  
GAINESVILLE, FL 32601 US

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: ROBERT WARREN

03/29/2006

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: REEVES, MICHELLE M  
Address: 305 NE 5TH AVENUE  
City-St-Zip: GAINESVILLE, FL 32601

Title: T ( ) Delete  
Name: THAXTON, KELLY  
Address: 733 NE 3RD STREET  
City-St-Zip: GAINESVILLE, FL 32601

Title: VP ( ) Delete  
Name: BARR, MELANIE  
Address: 216 NE 5TH STREET  
City-St-Zip: GAINESVILLE, FL 32601

Title: D ( ) Delete  
Name: WARINNER, BILL  
Address: 306 NE 5 AVE  
City-St-Zip: GAINESVILLE, FL 32601

Title: D ( ) Delete  
Name: JOHNSON, SUE  
Address: 914 NE NOPULEVARD  
City-St-Zip: GAINESVILLE, FL 32601

Title: D ( ) Delete  
Name: AUTH, JOANNE  
Address: 425 NE 7TH STREET  
City-St-Zip: GAINESVILLE, FL 32601

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR. (X) Change ( ) Addition  
Name: WELLS, RANDOLF M PRES  
Address: 530 NE 10TH AVENUE  
City-St-Zip: GAINESVILLE, FL 32601

Title: MS. (X) Change ( ) Addition  
Name: BARR, MELANIE VP  
Address: 216 NE 5TH STREET  
City-St-Zip: GAINESVILLE, FL 32601

Title: MS. (X) Change ( ) Addition  
Name: AUTH, JOANNE SECY  
Address: 425 NE 7TH STREET  
City-St-Zip: GAINESVILLE, FL 32601

Title: MS. (X) Change ( ) Addition  
Name: REEVES, MICHELLE TREAS  
Address: 305 NE 5TH AVENUE  
City-St-Zip: GAINESVILLE, FL 32601

Title: MR. (X) Change ( ) Addition  
Name: COVELL, CHARLES BOARD  
Address: 207 NE 9TH AVENUE  
City-St-Zip: GAINESVILLE, FL 32601

Title: MR. (X) Change ( ) Addition  
Name: NOZZI, DOM BOARD  
Address: 516 NE 4TH STREET  
City-St-Zip: GAINESVILLE, FL 32601

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: RANDOLF M WELLS

PRES

03/29/2006

Electronic Signature of Signing Officer or Director

Date