

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002516

FILED
May 07, 2007
Secretary of State

Entity Name: MCNEIL WOODS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1236 MCNEIL WOODS PLACE
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

1291 MCNEIL WOODS PLACE
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

1236 MCNEIL WOODS PLACE
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

1291 MCNEIL WOODS PLACE
ALTAMONTE SPRINGS, FL 32714

FEI Number: 59-3260927 **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:

DARE, SUSAN
1236 MCNEIL WOODS PLAE
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

SECKINGER, GEORGE
1291 MCNEIL WOODS PLAE
ALTAMONTE SPRINGS, FL 32714 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: GEORGE SECKINGER

05/07/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DARE, SUSAN
Address: 1236 MC NEIL WOODS PL
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VP () Delete
Name: CIESLAK, DEBORAH
Address: 1260 MCNEIL WOODS PLACE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: TREA () Delete
Name: HOLT, ROGER
Address: 413 CURRY CT
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: DUNCAN, JACK
Address: 1285 MC NEIL WOODS PL
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VP (X) Change () Addition
Name: URBAN, PATRICIA
Address: 425 CURRY COURT
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: TREA (X) Change () Addition
Name: SECKINGER, GEORGE
Address: 1291 MCNEIL WOODS PLACE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: SUSAN G. DARE

PRES

05/07/2007

Electronic Signature of Signing Officer or Director

Date