

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003773

FILED
Feb 25, 2009
Secretary of State

Entity Name: MILLHOPPER STATION NORTH COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

901 NW 8TH AVE
SUITE A-6
GAINESVILLE, FL 32601 US

New Principal Place of Business:

Current Mailing Address:

901 NW 8TH AVE
SUITE A-6
GAINESVILLE, FL 32601 US

New Mailing Address:

FEI Number: 59-3218857

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALLY ANN WILSON C/O SUN LU PROPERTIES, INC
901 NW 8TH AVE
SUITE A-6
GAINESVILLE, FL 32601 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: TVP () Delete
Name: SKINNER, ROBERT G
Address: 6720 NW 40TH DR
City-St-Zip: GAINESVILLE, FL 32657

Title: P () Delete
Name: DEPUE, KRAIG
Address: 6830 NW 40TH DR
City-St-Zip: GAINESVILLE, FL 32653

Title: S () Delete
Name: HELMERSON, BRIAN
Address: 6736 NW 40TH DRIVE
City-St-Zip: GAINESVILLE, FL 32653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TVP (X) Change () Addition
Name: SKINNER, ROBERT G
Address: 6720 NW 40TH DR
City-St-Zip: GAINESVILLE, FL 32657 US

Title: P (X) Change () Addition
Name: DEPUE, KRAIG
Address: 6830 NW 40TH DR
City-St-Zip: GAINESVILLE, FL 32653 US

Title: S (X) Change () Addition
Name: HELMERSON, BRIAN
Address: 6736 NW 40TH DRIVE
City-St-Zip: GAINESVILLE, FL 32653 US

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: BRIAN HELMERSON

S

02/25/2009

Electronic Signature of Signing Officer or Director

Date