

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Jun 17, 2011
Secretary of State**

DOCUMENT# N94000001983

Entity Name: MILLPOND ESTATES SECTION FOUR HOMEOWNER'S ASSOCIATION, INC.**Current Principal Place of Business:**4204 MCCLUNG DR
NEW PORT RICHEY, FL 34653**New Principal Place of Business:****Current Mailing Address:**4204 MCCLUNG DR
NEW PORT RICHEY, FL 34653**New Mailing Address:**40347 US 19 NORTH, SUITE 201
TARPON SPRINGS, FL 34689 US

FEI Number: 59-3254247

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:BYLSKI, BARBARA J
4204 MCCLUNG DR
NEW PORT RICHEY, FL 34653 US**Name and Address of New Registered Agent:**KARAGIANIS, IRENE
40347 US 19 NORTH, SUITE 201
TARPON SPRINGS, FL 34689 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: IRENE KARAGIANIS

06/17/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: P
Name: ISNARDI, THOMAS
Address: 7610 MORNINGDALE ST
City-St-Zip: NEW PORT RICHEY, FL 34653Title: T
Name: BYLSKI, BARBARA
Address: 4204 MCCLUNG DR
City-St-Zip: NEW PORT RICHEY, FL 34653Title: V
Name: BALDWIN, RICHARD S
Address: 7618 MORNINGDALE ST
City-St-Zip: NEW PORT RICHEY, FL 34653Title: S
Name: CARUSO, JOAN
Address: 4217 MCCLUNG DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34653

I hereby 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 all other like empowered.

SIGNATURE: THOMAS ISNARDI

PRES

06/17/2011

Electronic Signature of Signing Officer or Director

Date