

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000261

FILED
May 14, 2007
Secretary of State

Entity Name: MILLPOND ESTATES SECTION SEVEN HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

5609 US 19
STE E
NEW PORT RICHEY, FL 34652 US

New Principal Place of Business:

Current Mailing Address:

5609 US 19
STE E
NEW PORT RICHEY, FL 34652 US

New Mailing Address:

FEI Number: 59-3304211 **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:

COMMUNITY MANAGEMENT
5609 US 19
NEW PORT RICHEY, FL 34652 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: PD () Delete
Name: EDWIN, DECECK
Address: 4426 NORIO STREET
City-St-Zip: NEW PORT RICHEY, FL 34-65.

Title: D () Delete
Name: MONTERO, LUIS
Address: 4440 ONORIO ST
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: TD () Delete
Name: PAUL, RITA T
Address: 4519 ONORIO ST.
City-St-Zip: NEWPORT RICHEY, FL 34653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ROBBINS, LANA
Address: 4210 ONORIO STREET
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: VPD (X) Change () Addition
Name: BUNN, MONICA
Address: 4449 ONORIO ST
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: TD (X) Change () Addition
Name: PATEL, G
Address: 4448 ONORIO ST.
City-St-Zip: NEWPORT RICHEY, FL 34653

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: LANA ROBBINS

PD

05/14/2007

Electronic Signature of Signing Officer or Director

Date