2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered.

MATURE AND TYPED OR P

ED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

Apr 28, 2006 8:00 am Secretary of State DOCUMENT # N95000001266 04-28-2006 90203 037 ****61.25 THE MILESTONE PROPERTY OWNERS ASSOCIATION. Principal Place of Business Mailing Address 3298 SUMMIT BLVD. 3298 SUMMIT BLVD. STE. 4 STE. 4 PENSACOLA, FL 32503 PENSACOLA, FL 32503 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04192006 Chg-NP CR2E037 (11/05) City & State City & State 4. FEI Numbe Applied For 59-3351975 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ETHERIDGE, KEVIN R 3298 SUMMIT BLVD Street Address (P.O. Box Number is Not Acceptable) STE 4 PENSACOLA, FL 32503 City Zip Code 8. 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. Lam familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Filing Fee Is \$61.25 Make check payable to \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2006 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Delete TITLE Change ☐ Addition SD PARSON, MIKE NAME NAME STREET ADDRESS 225 NEWBERRY STREET ADDRESS CITY-ST-ZIP CANTONMENT, FL 32533 CITY-ST-7IP TITLE Delete Addition TITLE ☐ Change DALLY, TIM NAME NAME Burroughs Jerry 124 Mount P. lot St. STREET ADDRESS 131 MY, PILOT ST. STREET ADDRESS CITY-ST-ZIP CANONMENT, FL 32533 CITY-ST-ZIP Cantonment 32533 TITLE Delete TITLE **Y**ZÎ Change ☐ Addition MALONE, ROBERT NAME NAME STREET ADDRESS 1661 W. 9 1/2 MILE RD STREET ADDRESS CITY-ST-ZIP CANTONMENT, FL 32533 CITY-ST-ZIP TITLE Delete TITLE ☐ Change **Addition** PEARSON, DOUG NAME NAME white, Rick STREET ADDRESS 174 DORWELLS ST STREET ADDRESS 214 New berry CITY-ST-ZIP CANTONMENT, FL 32533 CITY-ST-7IP Cantonment 32533 TITLE ☐ Delete TITLE **⊠** Change ☐ Addition HINSON, HOYT NAME NAME STREET ADDRESS 50 CULPEPPER ST. STREET ADDRESS CITY-ST-ZIP CANTONMENT, FL 32533 CITY-ST-7IP TITLE Delete TITLE ☐ Change Addition NAME COLLINS, IRENE NAME , Keu: n 1161 SWEET BRIAR STREET Danville STREET ADDRESS STREET ADDRESS Cantonment, FC CANTONMENT, FL 32533 CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if

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