

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002868

FILED
Mar 10, 2011
Secretary of State

Entity Name: MILLPOND LAKES VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5901 US 19 N
STE 7Q
NEW PORT RICHEY, FL 34652 US

Current Mailing Address:

5901 US 19 N
STE 7Q
NEW PORT RICHEY, FL 34652 US

New Principal Place of Business:

C/O QUALIFIED PROPERTY MGMT INC
5901 US HWY 19, STE 7Q
NEW PORT RICHEY, FL 34652 US

New Mailing Address:

C/O QUALIFIED PROPERTY MGMT INC
5901 US HWY 19, STE 7Q
NEW PORT RICHEY, FL 34652 US

FEI Number: 59-3304210

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUALIFIED PROPERTY MANAGEMENT, INC.
5901 US 19 N
STE 7Q
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
Name: DOYLE, FRANK
Address: 4423 WHITTON WAY
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: TD
Name: HOLMES, PAUL
Address: 4539 WHITTON WAY
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: SD
Name: WALLACE, JANE
Address: 4553 WHITTON WAY
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: D
Name: MYERS, FRANK
Address: 4414 WHITTON WAY
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: D
Name: BURNS, DON
Address: 4422 WHITTON WAY
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: FRANK DOYLE

PD

03/10/2011

Electronic Signature of Signing Officer or Director

Date