

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001123

FILED
May 01, 2006
Secretary of State

Entity Name: MINT HILL HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

5055 MINT HILL CT
TALLAHASSEE, FL 32309 US

New Principal Place of Business:

Current Mailing Address:

2021 FOREST GLEN COURT
TALLAHASSEE, FL 32303 US

New Mailing Address:

5002 MINT HILL COURT
TALLAHASSEE, FL 32309 US

FEI Number: 59-3364818 **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:

STEBBINS, MELINDA
5055 MINT HILL CT
TALLAHASSEE, FL 32309 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: D () Delete
Name: SKINNER, ROSEMARY
Address: 5091 MINT HILL CT
City-St-Zip: TALLAHASSEE, FL 32309

Title: D () Delete
Name: MCCROHAN, MARY
Address: 5072 MINT HILL CT
City-St-Zip: TALLAHASSEE, FL 32309

Title: P () Delete
Name: STEBBINS, MELINDA
Address: 5055 MINT HILL CT
City-St-Zip: TALLAHASSEE, FL 32309

Title: S () Delete
Name: ROSETTI, MARILYN
Address: 2021 FOREST GLEN CT
City-St-Zip: TALLAHASSEE, FL 32303

Title: T () Delete
Name: NORDBY, DOUG
Address: 5030 MINT HILL CT
City-St-Zip: TALLAHASSEE, FL 32309

Title: D () Delete
Name: GEOHAGAN, DORIS
Address: 5005 MINT HILL CT
City-St-Zip: TALLAHASSEE, FL 32309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: KING, KALEY
Address: 5002 MINT HILL COURT
City-St-Zip: TALLAHASSEE, FL 32309

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: KALEY KING

S

05/01/2006

Electronic Signature of Signing Officer or Director

Date