

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003567

FILED
Apr 22, 2005
Secretary of State

Entity Name: MISTY CREEK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

701 MISTY CREEK DRIVE
MELBOURNE, FL 329406433

New Principal Place of Business:

Current Mailing Address:

701 MISTY CREEK DRIVE
MELBOURNE, FL 329406433

New Mailing Address:

FEI Number: 59-3488054

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOHNE, KARL W
1803 AIRPORT BLVD
MELBOURNE, FL 32901 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: DP () Delete
Name: EVANS, CHARLES
Address: 710 MISTY CREEK DRIVE
City-St-Zip: MELBOURNE, FL 32940

Title: DVS () Delete
Name: FALCONE, ROGER
Address: 737 MILL CREEK ROAD
City-St-Zip: MELBOURNE, FL 32940

Title: DVT () Delete
Name: MCFALL, JOHN
Address: 690 MISTY CREEK DR
City-St-Zip: MELBOURNE, FL 32940

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DVT (X) Change () Addition
Name: SIMMONS, ELIZABETH
Address: 610 MISTY CREEK DR
City-St-Zip: MELBOURNE, FL 32940

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ELIZABETH SIMMONS

DVT

04/22/2005

Electronic Signature of Signing Officer or Director

Date