2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2006
Secretary of State

DOCUMENT# N97000005858

Entity Name: MILLER'S RUN OF BLUEWATER BAY HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 5163
NICEVILLE, FL 32578 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5163
NICEVILLE, FL 32578 US

New Mailing Address:

FEI Number: 59-3477530 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TOMASCHKO, GREGORY A
1470 TRAVERS CRT
NICEVILLE, FL 32578 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: VPD ( ) Delete
Name: SLANINA, FRED
Address: 1472 TRAVERS CRT
City-St-Zip: NICEVILLE, FL 32578

Title: TD ( ) Delete
Name: TOMASCHKO, GREG
Address: 1470 TRAVERS CRT
City-St-Zip: NICEVILLE, FL 32578

Title: SD ( ) Delete
Name: CORBETT, MARY
Address: 4382 HAGEN CRT
City-St-Zip: NICEVILLE, FL 32578

Title: PD ( ) Delete
Name: LUMSDEN, CAROL
Address: 1475 TRAVERS COURT
City-St-Zip: NICEVILLE, FL 32578

Title: D ( ) Delete
Name: DELEMARRE, COLLEEN
Address: 4378 HAGEN CRT
City-St-Zip: NICEVILLE, FL 32578

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change ( ) Addition
Name: SLANINA, FRED
Address: 1472 TRAVERS COURT
City-St-Zip: NICEVILLE, FL 32578

Title: TD (X) Change ( ) Addition
Name: TOMASCHKO, GREG
Address: 1470 TRAVERS COURT
City-St-Zip: NICEVILLE, FL 32578

Title: SD (X) Change ( ) Addition
Name: CORBETT, MARY
Address: 4382 HAGEN COURT
City-St-Zip: NICEVILLE, FL 32578

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

Title: D (X) Change ( ) Addition
Name: LOWE, SARA HELEN
Address: 4384 HAGEN COURT
City-St-Zip: NICEVILLE, FL 32578

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: GREG TOMASCHKO TD 04/18/2006
Electronic Signature of Signing Officer or Director — Date