

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 22, 2006 8:00 am
Secretary of State

05-22-2006 90047 029 ****61.25

DOCUMENT # N99000000275

1. Entity Name

MILLBROOK HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business

1260 MILLBROOK CIRCLE
BRADENTON FL 34212

Mailing Address

% CASEY CONDOMINIUM MANAGEMENT, LLC
4370 S. TAMiami TRAIL, SUITE 156
SARASOTA FL 34231



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

65-0899245

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CASEY CONDOMINIUM MGMT, LLC
4370 S. TAMiami TRAIL
SUITE 156
SARASOTA FL 34231

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Bridget Spence

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

4-26-06

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME KELLY, J.R.
STREET ADDRESS 1322 MILLBROOK CIRCLE
CITY-ST-ZIP BRADENTON FL 34212

TITLE V ☐ Delete
NAME FOSTER, LINDA
STREET ADDRESS 12611 MILLBROOK CIRCLE
CITY-ST-ZIP BRADENTON FL 34212

TITLE STD ☐ Delete
NAME HUGHES, NANCY
STREET ADDRESS 1327 MILLBROOK CIRCLE
CITY-ST-ZIP BRADENTON FL 34212

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Nancy L. Hughes Sec. Treasurer

04/26/06 941-526-8101