

Certified Mail # 7004 0550 0000 5429 8496
**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**


FILED
May 03, 2005 8:00 am
Secretary of State

05-03-2005 90166 022 ****61.25

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04062005 Chg-NP CR2E037 (10/03)

DOCUMENT # N99000006478					
1. Entity Name MILL CREEK VI ASSOCIATION, INC.					
Principal Place of Business 9115 58TH DR. EAST, STE. B BRADENTON, FL 34202			Mailing Address 9115 58TH DR. EAST, STE. A BRADENTON, FL 34202		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 65-0981992	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent D'URSO, LARRY J JR. 9115 58TH DR. EAST, STE. B BRADENTON, FL 34202				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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
				Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PD			TITLE	
NAME	LECKEY, PHILLIP D	<input type="checkbox"/> Delete		NAME	
STREET ADDRESS	9115 58TH DR. EAST, STE. B			STREET ADDRESS	
CITY-ST-ZIP	BRADENTON, FL 34202			CITY-ST-ZIP	
TITLE	DV			TITLE	
NAME	SANDERS, LINDA K	<input type="checkbox"/> Delete		NAME	
STREET ADDRESS	9115 58TH DR. EAST, STE. B			STREET ADDRESS	
CITY-ST-ZIP	BRADENTON, FL 34202			CITY-ST-ZIP	
TITLE	STD			TITLE	
NAME	PATRICK, CHRISTINA	<input checked="" type="checkbox"/> Delete		NAME	Secretary, Director
STREET ADDRESS	9115 58TH DR E STE A			STREET ADDRESS	Amy SANDERS
CITY-ST-ZIP	BRADENTON, FL 34202			CITY-ST-ZIP	9115 58TH DR. E. Suite A
TITLE		<input type="checkbox"/> Delete		TITLE	Bradenaton, FL 34202
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY-ST-ZIP				CITY-ST-ZIP	
TITLE		<input type="checkbox"/> Delete		TITLE	
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY-ST-ZIP				CITY-ST-ZIP	
TITLE		<input type="checkbox"/> Delete		TITLE	
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY-ST-ZIP				CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify 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 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: <i>Linda K. Sanders, Vice President</i>				4/25/05 941-753-7851	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date Daytime Phone #	