

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2006 08:00 AM
Secretary of State

DOCUMENT # P97000076808
 1. Entity Name
MILLSTONE ROADWAY ASSOCIATION, INC.



Principal Place of Business Mailing Address
 2682 MILLSTONE PLANTATION ROAD 2682 MILLSTONE PLANTATION ROAD
 TALLAHASSEE, FL 32312 TALLAHASSEE, FL 32312



02072006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3477000** Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
 HUBBS, JOHN F
 2682 MILLSTONE PLANTATION ROAD
 TALLAHASSEE, FL 32312

DO NOT WRITE IN THIS SPACE

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

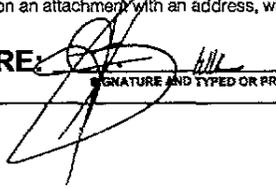
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 02/20/06-80072-019 150.00

10. OFFICERS AND DIRECTORS

TITLE	STD
NAME	HUBBS, JOHN F
STREET ADDRESS	2682 MILLSTONE PLANTATION ROAD
CITY-ST-ZIP	TALLAHASSEE, FL 32312
TITLE	PD
NAME	SIMMONS, GEORGE W
STREET ADDRESS	2701 N MONROE STREET
CITY-ST-ZIP	TALLAHASSEE, FL 32303
TITLE	D
NAME	BARNES, STAN
STREET ADDRESS	2697 MILLSTONE PLANTATION RD
CITY-ST-ZIP	TALLAHASSEE, FL 32312
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, 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:  **JOHN F. HUBBS** **02/07/06**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #