2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726005

FILED Mar 27, 2009 Secretary of State

Entity Name: HILLSBORO LANDINGS ONE ASSOCIATION, INC.

Current Principal Place of Business:			New Prince	New Principal Place of Business:		
	ERVIEW RD. LD BEACH, FL	33441				
Current Mailing Address:			New Mail	New Mailing Address:		
	LLSBORO BLV LD BEACH, FL					
FEI Number	r: 59-1496625	FEI Number Applied For()	FEI Number Not App	olicable ()	Certificate of Status Desired ()	
Name and	d Address of C	Current Registered Agent:	Name and	d Address of	New Registered Agent:	
1215 E. H	LL PROPERTY ILLSBORO BL' LD BEACH, FL					
	e named entity e of Florida.	submits this statement for th	e purpose of changing	its registered	d office or registered agent, or both,	
SIGNATU						
	Electror	nic Signature of Registered	Agent		Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	MUNSELL, JEF 1631 RIVERVIE		Title: Name: Address: City-St-Zip:	(()Change ()Addition	
Title: Name: Address: City-St-Zip:	LIMPKE, JILL 1631 RIVERVIE) Delete EW RD EACH, FL 33441	Title: Name: Address: City-St-Zip:	WHEELER, D 1631 RIVER\		
Title: Name: Address: City-St-Zip:	DODSON, ROE 1631 RIVERVIE		Title: Name: Address: City-St-Zip:	(() Change () Addition	
Title: Name: Address: City-St-Zip:	BUTA, JOAN 1631 RIVERVIE) Delete EW DRIVE EACH, FL 33441	Title: Name: Address: City-St-Zip:	(() Change() Addition	
o, op.	D () Delete GE	Title: Name: Address:	(() Change () Addition	
Fitle: Name: Address: City-St-Zip:	SCULLY, MARC 1631 RIVERVIE	EW ROAD EACH, FL 33441	City-St-Zip:			

I hereby certify that the information supplied with this filing does not qualify 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: DONALD WHEELER P 03/27/2009