FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT #

(3)

HAWTHORNE POINT CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Malling Address		
2821 W HAWTHORNE ROAD TAMPA FL 33611 US	2819 HAWTHORNE RD. TAMPA FL 33611 US	3. Date incorpora 10/24/19 4. FEI Number 59-16708	
2. Principal Place of Business	2a. Mailing Address 26	5. Certificate of S	

FILED Mar 06 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address			- 1 100341 F8000 AUIU B8010 10410 U100		II DIEIF BIBLI OF	JEY 01071 1061				
2821 W HAWTHORNE ROAD 2819 HAWTHORNE RD. TAMPA FL 33611 TAMPA FL 33611					3. Date incorporated or Qualified	ļ				
		FL 33611	t			10/24/1974				
JS		U\$					4. FEI Number		A	oplied For
							59-1670860			ot Applicable
2. Principal F	Place of Business	2a M	ailing Address				38 1070000			
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	26			5. Certificate of Status Desired		+	Additional equired			
Suite, Apt	. #, etc.		ite, Apt. #, etc.				6. Election Campaign Financing		\$5.00	
2		27			Trust Fund Contribution	П	Added to			
City & Sta	te		ty & State					<u> </u>		
a)		28			7. Is this nonprofit corporation a		ns associatio □ No	111		
Zip	Country		Zip Country		8. This corporation owes or has	neid the cur	rent veer In	engible		
a	25	29	—		Personal Property Tax due June 30. Yes No					
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent										
					81	Name				
20054	ATEN									
BODENSTEIN, ESTELLE 2819 HAWTHORNE RD. TAMPA FLORIDA FL 33611			82 Street Address (P.O. Box Number is Not Acceptable)							
										
		83	I							
					84	City			85 Zip	Code
						1		FL	. 33	
office or	to the provisions of Sections 617.05 registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida	Such change was a	uthorize	d by	the corporation	oration submits this statement for the on's board of directors. I hereby acc	purpose o ept the app	f changing it cointment as	s registered registered
SIGNATURE			0.075	D 111				DATE		
12.	Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Age 12. OFFICERS AND DIRECTORS 13.			0 496	m signature require	ADDITIONS/CHANGES TO OFF		LUBECTOR	29 IN 12	
		ND DIRECTO	DELETE	_	71 5	Tes		IOCHO ANI	Change	Addition
TITLE	PD FOOLS SPANOS		PA DELETE	1.1 79			esident - D		SERT CHAIRD	L. ADDITION
NAME	TOOLE, FRANCES			1.2 N	AME	Wt	Illiam Rohrer _			

SIGNATURE								
Signature, typed or printed name of registered agent and title if applicable (NOTE: Ro 12. OFFICERS AND DIRECTORS			Registered Agent signature required when reinstating) DATE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITLE	PD	DELETE	1.1 TITLE	T	Change	Addition		
		pas occere		President - D	ESC CHAIRGO	L Addition		
NAME	TOOLE, FRANCES		1.2 NAME	William Rohrer				
STREET ADDRESS	2821 HAWTHORNE ROAD		1.3 STREET ADDRESS	2827 Hawthorne Rd				
CITY-ST-ZIP	TAMPA FL 33611		1.4 CITY-ST-ZIP	Tampa, FL 33611				
TITLE	VD	DELETE	2.1 TITLE	Vice President - D	Change	Addition		
NAME	BROWN, CLINT		2.2 NAME		701			
STREET ADDRESS	2817 HAWTHORNE RD		2.3 STREET ADDRESS	2821 Hawthorns	e Kal	Į.		
CITY-ST-ZIP	TAMPA FL 33611		2.4 CITY+ST-ZIP	Tampa, FL 33611				
TITLE	\$D	DELETE	3.1 TITLE	SP. '	Change	☐ Addition		
NAME	GILL, MELISSA		3.2 NAME	Emily Rohrer		-		
STREET ADDRESS	2815 HAWTHORNE RD		3.3 STREET ADDRESS	Emily Rohrer 2827 Hawthorne Rd		i		
CITY -ST-ZIP	TAMPA FL 33611		3.4. CITY - ST - ZIP	Tampa FL 33611				
TITLE	TD	☐ DELETE	4.1 TITLE		Change	Addition		
NAME	BODENSTEIN, ESTELLE		4. 2 NAME					
STREET ADDRESS	2821 W HAWTHORNE ROAD		4.3 STREET ADDRESS					
CITY-ST-ZIP	TAMPA FL 33611		4.4 CITY - ST - ZIP					
TITLE		☐ DELETE	5.1 TITLE		Change	Addition		
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET ADDRESS					
CITY-ST-ZIP			5.4 CITY-ST-ZIP					
TITLE		DELETE	6.1 TITLE		Change	Addition		
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET ADDRESS					
				I				

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.