

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 16, 2007 8:00 am
Secretary of State

04-16-2007 90036 046 ****61.25



DOCUMENT # N02000004205

1. Entity Name
 THE HILLS HOMEOWNERS ASSOCIATION OF APOPKA, INCORPORATED

Principal Place of Business **Mailing Address**
 1100 ROGER WILLIAMS AVENUE 1100 ROGER WILLIAMS AVENUE
 APOPKA FL 32703 APOPKA FL 32703

2. Principal Place of Business - No P.O. Box # **3. Mailing Address**

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State **City & State**

Zip **Country** **Zip** **Country**

4. FEI Number **Applied For**
 NO-T APPLICABLE Not Applicable

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

6. Name and Address of Current Registered Agent
 STEWART, BARBARA
 1481 HOLLYHOCK CIRCLE
 APOPKA FL 32703

7. Name and Address of New Registered Agent
 Name: *Marlys Edwards*
 Street Address (P.O. Box Number is Not Acceptable): *1247 Dover Circle*
 City: *Apopka* **FL** Zip Code: *32703*

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 *Marlys A Edwards* *Marlys Edwards* *4-2-07*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE



1st MOORE CR2E037 (10/06)

FILE NOW: FEE IS \$61.25 Due By May 1, 2007

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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: P NAME: SCOTT, WILLIS DR. STREET ADDRESS: 1468 GLENWOOD CIRCLE CITY-ST-ZIP: APOPKA FL 32703	<input checked="" type="checkbox"/> Delete	TITLE: P NAME: <i>Russell Edwards</i> STREET ADDRESS: <i>1247 - Dover Circle</i> CITY-ST-ZIP: <i>APOPKA, FL. 32703</i>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: D NAME: DEMORANVILLE, EDGAR STREET ADDRESS: 1337 FLAMINGO CIR CITY-ST-ZIP: APOPKA FL 32703	<input type="checkbox"/> Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: D NAME: DORLAND, GRAND STREET ADDRESS: 1318 EVERGLADES CIRCLE CITY-ST-ZIP: APOPKA FL 32703	<input type="checkbox"/> Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: D NAME: KRAFT, EVELYN STREET ADDRESS: 1271 DOVER CIRCLE CITY-ST-ZIP: APOPKA FL 32703	<input type="checkbox"/> Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: V NAME: JONES, VIRGINIA STREET ADDRESS: 1480 GLENWOOD CIRCLE CITY-ST-ZIP: APOPKA FL 32703	<input checked="" type="checkbox"/> Delete	TITLE: V NAME: <i>Ann Migacz</i> STREET ADDRESS: <i>1378 Everglades Circle</i> CITY-ST-ZIP: <i>Apopka, FL. 32703</i>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: S NAME: STEWART, BARBARA STREET ADDRESS: 1481 HOLLYHOCK CIRCLE CITY-ST-ZIP: APOPKA FL 32703	<input checked="" type="checkbox"/> Delete	TITLE: S NAME: <i>Marlys Edwards</i> STREET ADDRESS: <i>1247 Dover Circle</i> CITY-ST-ZIP: <i>Apopka, FL. 32703</i>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Russell Edwards* *Russell Edwards* *4/2/2007* *880-1256*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #