

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002836

FILED
Apr 11, 2007
Secretary of State

Entity Name: HARTWOOD RESERVE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2180 W. SR. 434. SUITE 5000
LONGWOOD, FL 327795044

New Principal Place of Business:

Current Mailing Address:

2180 W. SR. 434. SUITE 5000
LONGWOOD, FL 327795044

New Mailing Address:

FEI Number: 20-3493757

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR.
SENTRY MANAGEMENT INC
2180 W. SR 434, SUITE 5000
LONGWOOD, FL 327795044 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: HUTSON, ROBERT
Address: 4037 AVALON PARK EAST BLVD
City-St-Zip: ORLANDO, FL 32828

Title: VPSD () Delete
Name: SCHMITT, DAVE PE
Address: 4037 AVALON PARK EAST BLVD
City-St-Zip: ORLANDO, FL 32828

Title: D () Delete
Name: UTTERBACK, RON
Address: 4037 AVALON PARK EAST BLVD
City-St-Zip: ORLANDO, FL 32828

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KENNICOTT, TONY
Address: 12124 HIGH TECH AVE STE 290
City-St-Zip: ORLANDO, FL 32817

Title: VPD (X) Change () Addition
Name: WEST, ALFRED
Address: 12124 HIGH TECH AVE STE 290
City-St-Zip: ORLANDO, FL 32817

Title: SD (X) Change () Addition
Name: PITTMAN, LARRY
Address: 12124 HIGH TECH AVE STE 290
City-St-Zip: ORLANDO, FL 32817

Title: D () Change (X) Addition
Name: MCAVOY, DON
Address: 12124 HIGH TECH AVE STE 290
City-St-Zip: ORLANDO, FL 32817

I hereby certify that the information supplied with this filing does not qualify for the 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: TONY KENNICOTT

PD

04/11/2007

Electronic Signature of Signing Officer or Director

_____ Date