

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11296

FILED  
Jan 18, 2012  
Secretary of State

**Entity Name:** HAPSHIRE VILLAS HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

807 W PLATT ST  
TAMPA, FL 33606 US

**New Principal Place of Business:**

**Current Mailing Address:**

NEFF PROPERTIES LLC  
P.O. BOX 10217  
TAMPA, FL 33679 US

**New Mailing Address:**

**FEI Number:** 59-3054372      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FRANK, FRISCIA  
5550 W EXECUTIVE DR  
STE 250  
TAMPA, FL 33609 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: T  
Name: HARTMAN, ALICE  
Address: PO BOX 10217  
City-St-Zip: TAMPA, FL 33679

Title: P  
Name: DUNLAP, BONNIE  
Address: PO BOX 10217  
City-St-Zip: TAMPA, FL 33679

Title: S  
Name: ALSTON, RICHARD C  
Address: PO BOX 10217  
City-St-Zip: TAMPA, FL 33679

Title: D  
Name: FRIBORG, ELSE  
Address: PO BOX 10217  
City-St-Zip: TAMPA, FL 33679

I hereby 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 all other like empowered.

SIGNATURE: BONNIE DUNLAP

P

01/18/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date