

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000059586

FILED
Jan 08, 2011
Secretary of State

Entity Name: HACIENDA DEL SOL II RENTAL ASSOCIATION, INC.

Current Principal Place of Business:

4301 S ATLANTIC AVE
NEW SMYRNA BEACH, FL 32169

New Principal Place of Business:

Current Mailing Address:

4301 S ATLANTIC AVE
NEW SMYRNA BEACH, FL 32169

New Mailing Address:

FEI Number: 04-3678726

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VICKREY, GARY
4301 S ATLANTIC AVE. #104
NEW SMYRNA BEACH, FL 32169 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: P
Name: CHIPPINDALE, KEVIN
Address: 4301 S. ATLANTIC AVE. #312
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: V
Name: GOEB, LAURA
Address: 4301 S ATLANTIC AVE. #407
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: S
Name: MCGUINNESS, GREG
Address: 4301 S. ATLANTIC AVE. #112
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: T
Name: LANE, JIM
Address: 4301 S. ATLANTIC AVE. #217
City-St-Zip: NEW SMYRNA BEACH, FL 31605

Title: BV
Name: VICKREY, GARY
Address: 4301 SOUTH ATLANTIC AVE. #104
City-St-Zip: NEW SMYRNA BEACH, FL 32169

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KEVIN CHIPPINDALE

P

01/08/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date