


# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 20, 2004 8:00 am**  
**Secretary of State**

04-20-2004 90035 037 \*\*\*\*61.25

<b>DOCUMENT # 727717</b> 1. Entity Name <b>HACIENDA DEL SOL II ASSOCIATION, INC.</b>					
Principal Place of Business <b>4301 S. ATLANTIC AVE. NEW SMYRNA BEACH, FL 32169-4026</b>			Mailing Address <b>4301 S. ATLANTIC AVE. NEW SMYRNA BEACH, FL 32169-4026</b>		
2. Principal Place of Business  Suite, Apt. #, etc.  City & State  Zip                      Country		3. Mailing Address  Suite, Apt. #, etc.  City & State  Zip                      Country			
4. FEI Number <b>59-1502532</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>GUADALUPE, JORGE</b> <b>4301 S ATLANTIC AVENUE</b> <b>#315</b> <b>NEW SMYRNA BEACH, FL 32169</b>			7. Name and Address of New Registered Agent  Name <i>Helen Haw</i> Street Address (P.O. Box Number is Not Acceptable) <i>4301 S. Atlantic Ave. #104</i> City <i>New Smyrna Beach</i> State <b>FL</b> Zip Code <i>32169</i>		
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 <i>Helen Haw / Manager</i> DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CHRISTENSON, SANDRA 5095 NAGONSAT AVENUE ORLANDO, FL 32808		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WHEELER, CINN 1411 S GRANT STREET LONGWOOD, FL 32750		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>see typed list</i> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P CAMPBELL, BEVERLY 1411 S. GRANT STREET LONGWOOD, FL 32750		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BLAKE, CLAYTON 4301 S ATLANTIC AVENUE #506 NEW SMYRNA BEACH, FL 32169		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>see typed list</i> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SWITZER, MANCIA 200 SPRINGSIDE ROAD LONGWOOD, FL 32779		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MCNEAL, KARL 4301 S. ATLANTIC AVENUE SUITE 410 NEW SMYRNA BEACH, FL 32169		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. 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 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: <i>Helen Haw / Manager</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date: <i>03/17/04</i>		Daytime Phone #: <i>386/427-5031</i>

44031931



01102004 Chg-NP CR2E037 (10/03)

Attachment

44031931

#727717

**HACEINDA DEL SOL II  
BOARD OF DIRECTORS 2003-2004**

**PRESIDENT**

Beverly Campbell  
1411 S. Grant St.  
Longwood, Fl 32750  
H (407) 830-5057  
U (386) 428-2172

**VICE PRESIDENT**

Sandra Christensen  
5095 Neponset Ave  
Orlando, Fl 32808  
H (407) 578-8894  
U (386) 423-8962

**SECRETARY**

Marcia Switzer  
1249 St. Albans Loop  
Heathrow, Fl 32746  
H (407) 833-8303  
U (386) 423-9713

**TREASURER**

Sue Mink  
1066 Cherry Creek Drive  
Valdosta, Ga 31605  
H (229) 242-1233  
U (386) 409-9990

**RENTAL CHAIRMAN**

Kevin Chippindale  
710 Delaney Ave  
Orlando, Fl 32801  
H (407) 895-4787  
U (386) 423-9279

**BUILDING CHAIRMAN**

Richard Leonardi  
20 Chi-Mar Drive  
Rochester, New York 14624  
H (585) 247-3586  
U (386) 423-7628

**GROUNDS COMMITTEE**

Karl McNeal  
4301 S. Atlantic Ave #410  
New Smyrna Beach, Fl 32169  
H (386) 423-1319  
U (386) 423-1319

**MANAGER**

Helen Harvey  
4301 S. Atlantic Ave #104  
New Smyrna Beach, Fl 32169  
H (386) 423-1884  
U (386) 423-1884