## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#770850**

Apr 28, 2004 Secretary of State

Entity Name: HARTSFIELD WOODS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

431 WAVERLY RD

TALLAHASSEE, FL 32312

**Current Mailing Address: New Mailing Address:** 

431 WAVERLY RD TALLAHASSEE, FL 32312

FEI Number: 59-2877899 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ISAACS, DON L ISAACS, DAN L 431 WAVERLY RD 431 WAVERLY RD

TALLAHASSEE, FL 32312 TALLAHASSEE, FL 32312

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: DAN LEE ISAACS 04/28/2004

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

TENENOFF, WENDY TENENOFF, WENDY Name: Name: 2722-B VIA MILANO Address: 2722-B VIA MILANO Address: City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: TALLAHASSEE, FL 32303

Title: DS Title: ( ) Delete (X) Change ( ) Addition

REILLY, JIM Name: REILLY, JIM Name:

Address: 2660 HARTSFIELD RD Address: 2660 HARTSFIELD RD City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: TALLAHASSEE, FL 32303

Title: DSVP () Delete Title: DS (X) Change ( ) Addition

TABER, MARY TABER, MARY Name: Name: 2315 CUMBERLAND DR Address: Address: 2315 CUMBERLAND DR City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: TALLAHASSEE, FL 32303

Title: ( ) Delete Title: (X) Change ( ) Addition

ROLAND, JACK Name: Name: FERNANDEZ, AURELIO Address: 2325 BRYNMAHR DR Address: 2309 BRYNMAHR

City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: TALLAHASSEE, FL 32303

Title: DVP () Delete Title: () Change () Addition SEGUNDO, KEITH Name: Name: 2325 BRYNMAHR DR Address: Address:

Title: (X) Delete Title: () Change () Addition

FERNANDEZ, AURELIO Name: Name: 2309 BRYNMAHR Address: Address: TALLAHASSEE, FL 32312 City-St-Zip: City-St-Zip:

TALLAHASSEE, FL 32303

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

City-St-Zip:

SIGNATURE: JIM REILLY **PRES** 04/28/2004