2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005951

FILED Apr 20, 2005 Secretary of State

Entity Name: HICKORY COVE HOMEOWNERS ASSOCIATION, INC.

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

5300 SOUTH ORANGE AVE. 1600 WEST COLONIAL DRIVE ORLANDO, FL 32809 ORLANDO, FL 32804 US

Current Mailing Address: New Mailing Address:

5300 SOUTH ORANGE AVE. P. O. BOX 531010

ORLANDO, FL 32809 ORLANDO, FL 32853 US

FEI Number: 80-0037553 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:

HARRELL, ROBERT S

5300 SOUTH ORANGE AVE.

ORLANDO, FL 32809 US

THE MELROSE MANAGEMENT GROUP
1600 WEST COLONIAL DRIVE
ORLANDO, FL 32804 US

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: JACK B. HANSON 04/20/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 HARRELL, ROBERT S
 Name:
 CECHOWSKI, BRIAN

 Address:
 5300 SOUTH ORANGE AVE
 Address:
 11348 PINEWOOD COVE LANE

 City-St-Zip:
 ORLANDO, FL 32809
 City-St-Zip:
 ORLANDO, FL 32817 US

Title: TD () Delete Title: VPD (X) Change () Addition Name: JONES, YOLANDA H Name: BENSON, DAVID

 Address:
 5300 SOUTH ORANGE AVE
 Address:
 11215 PINEWOOD COVE LANE

 City-St-Zip:
 ORLANDO, FL 32809
 City-St-Zip:
 ORLANDO, FL 32817 US

Title: SD () Delete Title: SD (X) Change () Addition Name: DOVE, SHANNA Name: VARGAS, HECTOR Address: 5300 SOUTH ORANGE AVE Address: 2531 HICKORY OAKS BLVD.

 Address:
 5300 SOUTH ORANGE AVE
 Address:
 2531 HICKORY OAKS BLVD.

 City-St-Zip:
 ORLANDO, FL 32809
 City-St-Zip:
 ORLANDO, FL 32817

Title: () Delete Title: TD () Change (X) Addition Name: FEDERICI, MARLA

Address: Address: 11130 PINEWOOD COVE LANE

City-St-Zip: City-St-Zip: ORLAND, FL 32817 US

Name: WILSON, JESSICA

 Address:
 Address:
 11050 PINEWOOD COVE LANE

 City-St-Zip:
 City-St-Zip:
 ORLANDO, FL 32817 US

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

Title: () Delete Title: DD () Change (X) Addition Name: SMITH, TYRONE

Address: Address: 11426 PINEWOOD COVE LANE City-St-Zip: 0RLANDO, FL 32817 US

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.

SIGNATURE: BRIAN CECHOWSKI PD 04/20/2005