

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734120

FILED  
Mar 19, 2009  
Secretary of State

**Entity Name:** HOME BUILDERS ASSOCIATION OF LAKE COUNTY, INC.

**Current Principal Place of Business:**

1100 N JOANNA AVE  
TAVARES, FL 32778

**New Principal Place of Business:**

**Current Mailing Address:**

1100 N JOANNA AVE  
TAVARES, FL 32778

**New Mailing Address:**

**FEI Number:** 59-1623355

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROBUCK, H D JR  
610 E MAIN ST  
LEESBURG, FL 34748 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: PP ( ) Delete  
Name: BIBLE, JAMES J  
Address: 10897 US HWY 441  
City-St-Zip: MOUNT DORA, FL 32757

Title: D ( ) Delete  
Name: COLEMAN, CLELL III,  
Address: 1107 N THOMAS RD.  
City-St-Zip: LEESBURG, FL

Title: VP ( ) Delete  
Name: HANSFORD, GEORGE  
Address: 1623 PATTON AVE  
City-St-Zip: APOPKA, FL

Title: P ( ) Delete  
Name: KELLER, MARK  
Address: 11548 OSPREY POINTE BLVD  
City-St-Zip: CLERMONT, FL 34711

Title: D ( ) Delete  
Name: HEGSTROM, CRAIG  
Address: 25445 SR 46  
City-St-Zip: SORRENTO, FL

Title: D ( ) Delete  
Name: CARTER, MIKE  
Address: 2310 S. BAY ST.  
City-St-Zip: EUSTIS, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PPRE (X) Change ( ) Addition  
Name: KELLER, MARK  
Address: 11548 OSPREY POINTE BLVD.  
City-St-Zip: CLERMONT, FL 34711

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PRES (X) Change ( ) Addition  
Name: HANSFORD, GEORGE  
Address: 1623 PATTON AVE  
City-St-Zip: APOPKA, FL

Title: VP (X) Change ( ) Addition  
Name: NUTT, ANDREW  
Address: 2220 CYPRESS COVE DR  
City-St-Zip: TAVARES, FL 32778

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: GEORGE HANSFORD

MR.

03/19/2009

Electronic Signature of Signing Officer or Director

Date