2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005415

FILED Apr 22, 2009 Secretary of State

Entity Name: HICKORY RIDGE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 1936 LEE RD STE 250 WINTER PARK, FL 32789 US **Current Mailing Address: New Mailing Address:** 1936 LEE RD STE 250 WINTER PARK, FL 32789 US FEI Number: 59-3365079 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: GREYSTONE MANAGEMENT COMPANY, INC. JANICE C. ARMSTRONG 1936 LEE RD STE 250 GREYSTONE MANAGEMENT COMPANY, INC. WINTER PARK, FL 32789 1936 LEE RD STE 250 US WINTER PARK, FL 32789 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: JANICE C. ARMSTRONG 04/22/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition CLARK, RICKY Name: Name: 7244 HICKORY BRANCH CIR Address: Address: City-St-Zip: ORLANDO, FL 32818 City-St-Zip: Title: SD () Delete Title: VΡ (X) Change () Addition ELEIDA, FELICIANO Name: AL, NELSON Name: Address: 7118 HICKORY BRANCH CIR Address: 7220 HICKORY BRANCH CIR City-St-Zip: ORLANDO, FL 32818 City-St-Zip: ORLANDO, FL 32818 Title: () Delete Title: (X) Change () Addition DAWSON, CHRISTION ELEDIA, FELECIAN Name: Name: 7136 HICKORY BRANCH CIR 7118 HICKORY BRANCH CIR Address: Address: City-St-Zip: ORLANDO, FL 32818 City-St-Zip: ORLANDO, FL 32818 Title: (X) Delete Title: () Change () Addition Name: HERNANDEZ, JORGE Name: 7129 HICKORY BRANCH CIR Address: Address: City-St-Zip: ORLANDO, FL 32818 City-St-Zip: Title: (X) Delete Title: () Change () Addition NELSON, AL Name: Name: 722 HICKORY BRANCH CIR Address: Address:

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.

City-St-Zip:

SIGNATURE: RICKY CLARK PRES 04/22/2009

ORLANDO, FL 32818

City-St-Zip: