

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000003968

**FILED**  
**Jan 18, 2024**  
**Secretary of State**  
**5092819874CC**

**Entity Name:** HOFFNER INDUSTRIAL PARK LOT OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

5300 S. ORANGE AVE  
ORLANDO, FL 32809

**Current Mailing Address:**

5300 S. ORANGE AVE  
ORLANDO, FL 32809

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

ASMA & ASMA, P.A.  
884 SOUTH DILLARD STREET  
WINTER GARDEN, FL 34787 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title D  
Name HARRELL, ROBERT  
Address 5300 S. ORANGE AVE  
City-State-Zip: ORLANDO FL 32809

Title D  
Name ASMA, WILLIAM N  
Address 884 SOUTH DILLARD STREET  
City-State-Zip: WINTER GARDEN FL 34787

Title D  
Name MORGAN, SHARON D  
Address 884 SOUTH DILLARD STREET  
City-State-Zip: WINTER GARDEN FL 34787

*I hereby 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 all other like empowered.*

**SIGNATURE: ROBERT S HARRELL**

**MGR**

**01/18/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date