

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51229

Entity Name: HIAWASSEE OAKS HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**7300 KATY NOLL CT.
ORLANDO, FL 32818**Current Mailing Address:**POB 681152
ORLANDO, FL 32868-1152**FEI Number: 59-3226469****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**FREEMAN, PINKIE P.
7300 KATY NOLL CT.
ORLANDO, FL 32818 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 V. P
Name EDWARDS, SELENA
Address 4744 BLOODHOUND ST
City-State-Zip: ORLANDO FL 32818

Title PRESIDENT
Name KING, MICHAEL
Address 718 BEAGLE ST.
City-State-Zip: ORLANDO FL 32818

Title DIRECTOR
Name GORDON, RUSSELL
Address 7268 HIAWASSEE OAK DR
City-State-Zip: ORLANDO FL 32818

Title DIRECTOR
Name SPENCER, WINSTON
Address 7511 HIGH LAKE DR
City-State-Zip: ORLANDO FL 32818

Title SECY
Name MAY, PAMELA
Address 4719 DOBERMAN ST
City-State-Zip: ORLANDO FL 32818

Title TREASURER
Name FREEMAN, PINKIE P
Address 7300 KATY NOLL CT
City-State-Zip: ORLANDO FL 32818

Title DIRECTOR
Name KANHAI, KALI
Address 7345 HIGH LAKE DR
City-State-Zip: ORLANDO FL 32818

Title DIRECTOR
Name AIKINS, TIM
Address 4742 BEAGLE ST
City-State-Zip: ORLANDO FL 32818

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: PINKIE P. FREEMAN**TREASURER****02/09/2017**

Electronic Signature of Signing Officer/Director Detail

Date