

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 380095

FILED  
Apr 03, 2011  
Secretary of State

**Entity Name:** HISSAR PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4013 DOUGLAS ROAD  
COCONUT GROVE, FL 33133

**New Principal Place of Business:**

**Current Mailing Address:**

4013 DOUGLAS ROAD  
COCONUT GROVE, FL 33133

**New Mailing Address:**

**FEI Number:** 52-0084765

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEON, ILIANA  
THE KAMPONG OF THE NTBG  
4013 DOUGLAS ROAD  
COCONUT GROVE, FL 33133 US

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

PARSONS, ANN  
THE KAMPONG OF THE NTBG  
4013 DOUGLAS ROAD  
COCONUT GROVE, FL 33133 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: ANN PARSONS

04/03/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: MS.  
Name: PARSONS, ANN  
Address: 4013 DOUGLAS ROAD  
City-St-Zip: COCONUT GROVE, FL 33133

Title: MR  
Name: GARDNER, PETER  
Address: 3250 MARY STREET, SUITE 200  
City-St-Zip: COCONUT GROVE, FL 33133

Title: MRS.  
Name: MILLARD, BETHANY  
Address: 3985 DOUGLAS ROAD  
City-St-Zip: COCONUT GROVE, FL 33133

Title: MR.  
Name: JONES, DAVID  
Address: 4013 DOUGLAS ROAD  
City-St-Zip: COCONUT GROVE, FL 33133

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANN PARSONS

MS.

04/03/2011

Electronic Signature of Signing Officer or Director

Date