

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720637

Entity Name: TREE HILL, INC.

FILED
Apr 01, 2009
Secretary of State

Current Principal Place of Business:

7152 LONE STAR ROAD
JACKSONVILLE, FL 322115836

New Principal Place of Business:

7152 LONE STAR ROAD
JACKSONVILLE, FL 322115836 US

Current Mailing Address:

7152 LONE STAR ROAD
JACKSONVILLE, FL 322115836

New Mailing Address:

7152 LONE STAR ROAD
JACKSONVILLE, FL 322115836 US

FEI Number: 23-7102764

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORTESE, LUCILLE G
7152 LONE STAR RD.
JACKSONVILLE, FL 32211 US

Name and Address of New Registered Agent:

CORTESE, LUCILLE G MS
7152 LONE STAR RD.
JACKSONVILLE, FL 32211 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: LUCILLE G. CORTESE

04/01/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: MD () Delete
Name: CORTESE, LUCILLE G
Address: 7152 LONE STAR RD
City-St-Zip: JACKSONVILLE, FL 00000, 32211

Title: P () Delete
Name: PHILLIPS, TONI
Address: 11667 JONATHON RD
City-St-Zip: JACKSONVILLE, FL 32225

Title: P () Delete
Name: HAMILTON, TIMOTHY
Address: 7311 POTTSBURG DRIVE
City-St-Zip: JACKSONVILLE, FL 32216

Title: VP () Delete
Name: DIAZ, EMILY
Address: ONE INDEPENDENT DR STE 1300
City-St-Zip: JACKSONVILLE, FL 32202

Title: T () Delete
Name: HALSTEAD, DAVID
Address: 14686 SILVER GLEN DRIVE
City-St-Zip: JACKSONVILLE, FL 32258

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ED (X) Change () Addition
Name: CORTESE, LUCILLE G MS
Address: 7152 LONE STAR RD
City-St-Zip: JACKSONVILLE, FL, FL 32211 US

Title: P-P (X) Change () Addition
Name: PHILLIPS, TONI MS
Address: 11667 JONATHON RD
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: P (X) Change () Addition
Name: HAMILTON, TIMOTHY MR
Address: 7311 POTTSBURG DRIVE
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: VP (X) Change () Addition
Name: MAGEE, EMILY MS
Address: ONE INDEPENDENT DR STE 1300
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: T (X) Change () Addition
Name: HALSTEAD, DAVID MR
Address: 14686 SILVER GLEN DRIVE
City-St-Zip: JACKSONVILLE, FL 32258 US

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: TIMOTHY HAMILTON

P

04/01/2009

Electronic Signature of Signing Officer or Director

Date