2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#723879

FILED Jan 09, 2012 Secretary of State

Entity Name: HALF MILE LAKE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

944 NW SPRUCE RIDGE DR STUART, FL 34994

Current Mailing Address: New Mailing Address:

944 NW SPRUCE RIDGE DR STUART, FL 34994

FEI Number: 59-1576825 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:

PATTEN, RICHARD

954 NW SPRI ICE RIDGE DR C-2

964 NW SPRI

954 NW SPRUCE RIDGE DR C-2 964 NW SPRUCE RIDGE DR. STUART, FL 34994 US D-4 STUART, FL 34994 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: PAT YUSKO 01/09/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: YUSKO, PAT

Address: 964 NW SPRUCE RIDGE DR., D-4

City-St-Zip: STUART, FL 349949

Title: VPD

Name: NORMANT, CHARLES

Address: 954 NW SPRUCE RIDGE DR C-8

City-St-Zip: STUART, FL 349949

Title: D

Name: FREKER, JOHN C

Address: 954 NW SPRUCE RIDGE DR., C-7

City-St-Zip: STUART, FL 34994

Title: SD

Name: CARROLL, JOSH

Address: 964 NE SPRUCE RIDGE #D-2

City-St-Zip: STUART, FL 34994

Title: TD

Name: ATWOOD, KATHERINE

Address: 954 NW SPRUCE RIDGE DR., C-7

City-St-Zip: STUART, FL 34994

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: PAT YUSKO PD 01/09/2012