## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 735965** 

Address:

City-St-Zip:

TEQUESTA, FL

Apr 12, 2007 Secretary of State

Entity Name: ROLLING HILLS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 11800 SE TIFFANY WAY TEQUESTA, FL 33469 US **Current Mailing Address: New Mailing Address:** 11800 SE TIFFANY WAY TEQUESTA, FL 33469 US FEI Number: 59-2173246 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: TARTAGLIA, BRENDA VAN BROCK, GARY 17109 SE LIMRICK CT 150 NO. U.S. HWY. #1 TEQUESTA, FL 33469 US SUITE 5 TEQUESTA, FL 33469 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: GARY VAN BROCK 04/12/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: P/D () Delete () Change () Addition VAN BROCK, GARY Name: Name: 11991 SE TIFFANY WAY Address: Address: City-St-Zip: TEQUESTA, FL 33469 City-St-Zip: Title: S/D Title: ( ) Delete () Change () Addition SCHAFFER, MARY LOU Name: Name: Address: 17267 SE GALWAY CT. Address: City-St-Zip: TEQUESTA, FL 33469 City-St-Zip: Title: () Delete Title: () Change () Addition WILLIAM, RUSSELL Name: Name: 11842 SE TIFFANY WAY Address: Address: City-St-Zip: TEQUESTA, FL 33469 City-St-Zip: Title: T/D ( ) Delete Title: T/D (X) Change ( ) Addition Name: TARTAGLIA, BRENDA Name: TARTAGLIA, BRENDA L 17109 SE LIMRICK CT 8476 SE MANGROVE ST Address: Address: City-St-Zip: TEQUESTA, FL 33469 City-St-Zip: HOBE SOUND, FL 33455 Title: VP/D () Delete Title: () Change () Addition SLOANE, SHEPARD V Name: Name: 17119 SE LIMRICK CT

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

SIGNATURE: BRENDA L. TARTAGLIA **TREA** 04/12/2007