

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740977

FILED
Apr 10, 2009
Secretary of State

Entity Name: THE HILL HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

16729 KAMALIN CT.
CLERMONT, FL 34715

New Principal Place of Business:

16713 KAMALIN COURT
CLERMONT, FL 34715

Current Mailing Address:

P.O. BOX 965
MINNEOLA, FL 34715

New Mailing Address:

P.O. BOX 965
MINNEOLA, FL 34755

FEI Number: 59-1888709

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMATO, THOMAS
16651 KAMALIN COURT
CLERMONT, FL 34715 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BLOMSTROM, ERIC
Address: 16729 KAMALIN CT.
City-St-Zip: MINNEOLA, FL 34715

Title: VP () Delete
Name: BLOMSTROM, ERICK
Address: 16729 KAMALIN COUT
City-St-Zip: CLERMONT, FL 34715

Title: S () Delete
Name: ENRICK, JUDITH
Address: 16713 KAMALIN COURT
City-St-Zip: CLERMONT, FL 34715

Title: T () Delete
Name: AMATO, THOMAS
Address: 16651 KAMALIN COURT
City-St-Zip: MINNEOLA, FL 34715

Title: D () Delete
Name: WEBB, WILLIAM
Address: 11209 WINDSON COURT
City-St-Zip: MINNEOLA, FL 34715

Title: D () Delete
Name: TIMPNER, MIKE
Address: 16745 KAMALIN COURT
City-St-Zip: CLERMONT, FL 34715

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: EMERICK, VERL
Address: 16713 KAMALIN CT.
City-St-Zip: CLERMONT, FL 34715

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: THOMAS AMATO

TREA

04/10/2009

Electronic Signature of Signing Officer or Director

Date