2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2009
Secretary of State

DOCUMENT# 746510

Entity Name: HANOVER EAST HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1960 DERBY TRAIL
WELLINGTON, FL 33414 US

New Principal Place of Business:

Current Mailing Address:

1960 DERBY TRAIL
WELLINGTON, FL 33414 US

New Mailing Address:

FEI Number: 59-2442134 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MACKENZIE, HELEN
1906 DERBY TRAIL
WELLINGTON, FL 33414 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: MILLICAN, LINDA D
Address: 1906 DERBY TRAIL
City-St-Zip: WELLINGTON, FL 33414 US

Title: SEC ( ) Delete
Name: KRUGER, JEFF
Address: 1906 DERBY TRAIL
City-St-Zip: WELLINGTON, FL 33414 US

Title: T ( ) Delete
Name: MACKENZIE, HELEN
Address: 1906 DERBY TRAIL
City-St-Zip: WELLINGTON, FL 33414 US

Title: V ( ) Delete
Name: URLLA, GENA
Address: 1918 DERBY TRAIL
City-St-Zip: WEST PALM BEACH, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: V (X) Change ( ) Addition
Name: VILLA, GENA
Address: 1918 DERBY TRAIL
City-St-Zip: WEST PALM BEACH, FL 33414

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: HELEN MACKENZIE HM 01/05/2009
Electronic Signature of Signing Officer or Director — Date