

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753087

FILED  
Jan 27, 2009  
Secretary of State

**Entity Name:** HAWTHORNE POND CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2927 GANDY BLVD  
TAMPA, FL 33611

**New Principal Place of Business:**

**Current Mailing Address:**

2931 GANDY BLVD  
TAMPA, FL 33611

**New Mailing Address:**

**FEI Number:** 59-2006656

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SHARP, HENRY  
2927 GANDY BLVD  
TAMPA, FL 33611 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: TD ( ) Delete  
Name: STANFORD, SHIRLEY  
Address: 2931 GANDY BLVD  
City-St-Zip: TAMPA, FL 33611

Title: D ( ) Delete  
Name: SHARP, HENRY  
Address: 2927 GANDY BLVD  
City-St-Zip: TAMPA, FL 33611

Title: PDS ( ) Delete  
Name: LAWRENCE, JEFF  
Address: PO BOX 6147  
City-St-Zip: TAMPA, FL 336080147

Title: D ( ) Delete  
Name: JOHNSTON, BRUCIE  
Address: 5010 BAYSHORE BLVD STE 8  
City-St-Zip: TAMPA, FL 33611

Title: VPD ( ) Delete  
Name: GILBERT, DONALD  
Address: 2923 GANDY BLVD  
City-St-Zip: TAMPA, FL 33611

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: DS (X) Change ( ) Addition  
Name: LAWRENCE, JEFF  
Address: 2917 W. GANDY BLVD  
City-St-Zip: TAMPA, FL 33611

Title: PD (X) Change ( ) Addition  
Name: GRAY, DALIA  
Address: 2919 W. GANDY BLVD  
City-St-Zip: TAMPA, FL 33611

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: DALIA GRAY

PD

01/27/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date