2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 12, 2007 8:00 am
Secretary of State
02-12-2007 90095 006 ****61.25

DOCUMENT # 754048

1. Entity Name

HIBISCUS GARDENS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
C/O PATRICIA CHORNY 12519 DEERBERRY LN. TAMPA FL 33626 US	C/O PATRICIA CHORNY 12519 DEERBERRY LN. TAMPA FL 33626 US

1st MOORE CR2E037 (10/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
103 18TH AVE #4	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: INDIAN ROCKS BEACH, FL	City & State
Zip: 33785 Country: US	Zip Country

4. FEI Number: 59-2376749 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CHORNY, PATRICIA A 12519 DEERBERRY LANE TAMPA FL 33626	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Patricia A. Chorny 2-1-07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25 Due By May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	**Make Check Payable to Florida Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD CWILL, JANICE 34 BUCHANAN ST BEACON NY 12508	☐ Delete	SD ROGERS, EDNA 17400 BLOOMING FIELDS DR. LAND O LAKES, FL 34638	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD FORKINS, BLANCHE 250 ORCHID DR MAHWAH NJ 07430	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD BLACK, TODD 103 18TH AVE 8 INDIAN ROCKS BEACH FL 33785	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD CHORNY, PATRICIA 12519 DEERBERRY LN TAMPA FL 33626	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Patricia A. Chorny 2-1-07 (813)855-9828
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #