

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754394

FILED
Mar 22, 2012
Secretary of State

Entity Name: HAILE PLANTATION ASSOCIATION, INC.

Current Principal Place of Business:

5208 SW 91ST DRIVE
STE D
GAINESVILLE, FL 32608

New Principal Place of Business:

Current Mailing Address:

5208 SW 91ST DRIVE
STE D
GAINESVILLE, FL 32608

New Mailing Address:

FEI Number: 59-2233496 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MANAGEMENT SPECIALISTS SERVICES
5208 SW 91ST DRIVE
STE D
GAINESVILLE, FL 32608 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
Name: WOLFSTEAD, KAREN
Address: 5208 SW 91ST DRIVE, SUITE D
City-St-Zip: GAINESVILLE, FL 32608

Title: VP
Name: LAKE, JAMES SR
Address: 5208 SW 91ST DRIVE, SUITE D
City-St-Zip: GAINESVILLE, FL 32608

Title: T
Name: MICHEAL, DOERR
Address: 5208 SW 91ST DRIVE, SUITE D
City-St-Zip: GAINESVILLE, FL 32608

Title: S
Name: PARKER, GLORIA
Address: 5208 SW 91ST DRIVE, SUITE D
City-St-Zip: GAINESVILLE, FL 32608

Title: D
Name: BILLINGS, PEGGY
Address: 5208 SW 91ST DRIVE, SUITE D
City-St-Zip: GAINESVILLE, FL 32608

Title: D
Name: WHITWORTH, JOANN
Address: 5208 SW 91ST DRIVE, SUITE D
City-St-Zip: GAINESVILLE, FL 32608

I hereby 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 all other like empowered.

SIGNATURE: MANAGEMENT SPECIALISTS SERVICES

A

03/22/2012

Electronic Signature of Signing Officer or Director

_____ Date

754394
3-22-12

Toner, Sean

From: Laura Meffen <laura@mssgainesville.com>
Sent: Friday, March 23, 2012 8:05 AM
To: Toner, Sean
Subject: Additional Officers Names

Please add additional officers to the following:

HAILE PLANTATION ASSOCIATION, INC.

Document Number 754394

John Westley White (D- Director)
5208 SW 91st Dr Suite D
Gainesville, FL 32608

Roderick Butler (D- Director)
5208 SW 91st Dr Suite D
Gainesville, FL 32608

Regina Esterman (D-Director)
5208 SW 91st Dr Suite D
Gainesville fl 32608

WILDS PLANTATION HOMEOWNERS ASSOCIATION,
INC.

Document Number N02000005069

Bill strawn (D- Director)
5208 SW 91st Dr Suite D
Gainesville FL 32608

WEST END MASTER MAINTENANCE, INC.

Document Number N11190

Randy Persad (D- Director)
5208 SW 91st Dr Suite D
Gainesville fl 32608

Marcietta Hoffmann (D- Director)
5208 SW 91st Dr Suite D
Gainesville FL 32608

THE TRAILS HOMEOWNERS & MAINTENANCE ASSOCIATION, INC.

Document Number N96000006462

(T- treasurer)
Lisa Crehore
5208 SW 91st Dr Suite D

Gainesville fl 32608

Mary Drummand (P-president)
5208 SW 91st Dr Suite D
Gainesville fl 32608

Thanks!

Laura

Management Specialists Services
5208 SW 91st Drive, Suite D
Gainesville, FL 32608
laura@mssgainesville.com
www.MSSgainesville.com
www.ManagementSpecialistsServices.com

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