

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758687

FILED
Feb 15, 2010
Secretary of State

Entity Name: HOLLINGSWORTH CREEK ASSOCIATION, INC.

Current Principal Place of Business:

1645 HOLLINGSWORTH CREEK
LAKELAND, FL 33803 US

New Principal Place of Business:

1606 HOLLINGSWORTH CREEK
LAKELAND, FL 33803 US

Current Mailing Address:

1645 HOLLINGSWORTH CREEK
LAKELAND, FL 33803 US

New Mailing Address:

1606 HOLLINGSWORTH CREEK
LAKELAND, FL 33803 US

FEI Number: 59-2637649

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOULE, JOHN L.
1605 HOLLINGSWORTH CREEK
LAKELAND, FL 33803 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: PD
Name: LOCKARD, TIM
Address: 1606 HOLLINGSWORTH CREEK
City-St-Zip: LAKELAND, FL 33803

Title: VPD
Name: SORIA, FERNANDO
Address: 1655 HOLLINGSWORTH CREEK
City-St-Zip: LAKELAND, FL 33803

Title: S
Name: LOCKARD, COLLEEN
Address: 1606 HOLLINGSWORTH CREEK
City-St-Zip: LAKELAND, FL 33803

Title: T
Name: SORIA, MARY
Address: 1655 HOLLINGSWORTH CREEK
City-St-Zip: LAKELAND, FL 33803

Title: D
Name: HOULE, JOHN L.
Address: 1605 HOLLINGSWORTH CRK.
City-St-Zip: LAKELAND, FL

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: TIM LOCKARD

PD

02/15/2010

Electronic Signature of Signing Officer or Director

Date