

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 762628

**FILED**  
**Mar 06, 2012**  
**Secretary of State**

**Entity Name:** HOBBIT'S GLEN COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

1600 NW 22ND CIRCLE  
GAINESVILLE, FL 32605 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ACTION MANAGEMENT OF GAINESVILLE, INC.  
6110-B NW 1ST PL  
GAINESVILLE, FL 32607 US

**New Mailing Address:**

**FEI Number:** 59-2170952      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

C/O ACTION MANAGEMENT OF GAINESVILLE, INC.  
6110-B NW 1ST PL  
GAINESVILLE, FL 32607 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: VD  
Name: MISIK, STEPHEN  
Address: 1649 NW 22 CIRCLE  
City-St-Zip: GAINESVILLE, FL 32605

Title: SD  
Name: TYLER, PAULA  
Address: 1638 NW 22ND CIRCLE  
City-St-Zip: GAINESVILLE, FL 32605

Title: PD  
Name: FISCHER, MARY  
Address: 1648 NW 22ND CIRCLE  
City-St-Zip: GAINESVILLE, FL 32605

Title: DT  
Name: HURTAK, DIANE  
Address: 1640 NW 22 CIRCLE  
City-St-Zip: GAINESVILLE, FL 32613

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: MARY FISCHER

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03/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date