

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763201

FILED  
Jan 16, 2012  
Secretary of State

**Entity Name:** HOMOSASSA SPRINGS GARDENS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

8320 W. EARL LOOP  
HOMOSASSA, FL 34446 US

**New Principal Place of Business:**

**Current Mailing Address:**

8320 W. EARL LOOP  
HOMOSASSA, FL 34446 US

**New Mailing Address:**

FEI Number: 59-2398336

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HIGBEA, JOAN  
8396 W EARL LOOP  
HOMOSASSA, FL 34446 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: HIGBEA, JOAN  
Address: 8396 W EARL LOOP  
City-St-Zip: HOMOSASSA, FL 34446 US

Title: S  
Name: JEAN, ABBAS  
Address: 8354 W EARL LOOP  
City-St-Zip: HOMOSASSA, FL 34446 US

Title: T  
Name: MINEAU, HELEN  
Address: PO BOX 743  
City-St-Zip: HOMOSASSA SPRINGS, FL 34447 US

Title: VP  
Name: LORNE, ROBSON  
Address: 8324 W EARL LOOP  
City-St-Zip: HOMOSASSA, FL 34446 US

Title: D  
Name: LACKEY, VICTOR  
Address: 8442 W EARL LOOP  
City-St-Zip: HOMOSASSA, FL 34446 US

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: LEANNE HADSELL, MANAGING AGENT

MGR

01/16/2012

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

\_\_\_\_\_ Date