2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2009
Secretary of State

DOCUMENT# 766340

Entity Name: HATCHETT CREEK MOBILE HOME PARK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

14 HATCHETT CREEK RD
VENICE, FL 34292

New Principal Place of Business:

14 HATCHETT CREEK RD
VENICE, FL 34285

Current Mailing Address:

14 HATCHETT CREEK RD
VENICE, FL 34292

New Mailing Address:

14 HATCHETT CREEK RD
VENICE, FL 34285

FEI Number: 90-0161656 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIAMSON, PATRICIA
416 HATCHETT CREEK RD
VENICE, FL 34285 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: D ( ) Delete
Name: COX, MARY
Address: 414 HATCHETT CREEK RD
City-St-Zip: VENICE, FL 34285

Title: TD ( ) Delete
Name: CUSIMANO, VICTOR
Address: 15 HATCHETT CREEK RD
City-St-Zip: VENICE, FL 34285

Title: P ( ) Delete
Name: DARE, BARBARA L
Address: 27 HATCHETT CREEK RD.
City-St-Zip: VENICE, FL 34285

Title: S ( ) Delete
Name: WILLIAMSON, PATRICIA
Address: 416 HATCHETT CREEK
City-St-Zip: VENICE, FL 34285

Title: V ( ) Delete
Name: SCHULTHEIS, JAMES
Address: 35 HATCHETT CREEK
City-St-Zip: VENICE, FL 34285

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition
Name: COX, MARY
Address: 414 HATCHETT CREEK RD
City-St-Zip: VENICE, FL 34285

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: MORAN, MARGARET
Address: 420 HATCHETT CREEK
City-St-Zip: VENICE, FL 34285

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PATRICIA WILLIAMSON S 03/26/2009

Electronic Signature of Signing Officer or Director — Date