

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003927

FILED
Feb 16, 2011
Secretary of State

Entity Name: THE HAND-MORRIS CENTER OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

300 CLYDE MORRIS BLVD
SUITE C
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

300 CLYDE MORRIS BLVD
SUITE C
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: 02-0592282

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORROW, BERT
300 CLYDE MORRIS BLVD
STE C
ORMOND BEACH, FL 32174 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
Name: HERMANSEN, DANE K
Address: 300 CLYDE MORRIS BLVD
City-St-Zip: ORMOND BEACH, FL 32174

Title: D
Name: MORROW, BERT M
Address: 300 CLYDE MORRIS BLVD
City-St-Zip: ORMOND BEACH, FL 32174

Title: D
Name: PARR, GREGORY A
Address: 300 CLYDE MORRIS BLVD
City-St-Zip: ORMOND BEACH, FL 32174

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: MICHAEL MATTHIES

ADMN

02/16/2011

Electronic Signature of Signing Officer or Director

Date