

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005302

FILED
Feb 20, 2009
Secretary of State

Entity Name: HARWOOD PLANTATION HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

3910 BELLAC ROAD
TALLAHASSEE, FL 323032648

New Principal Place of Business:

Current Mailing Address:

3910 BELLAC ROAD
TALLAHASSEE, FL 323032648

New Mailing Address:

FEI Number: 03-0439785

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAVANAGH, SUSAN C
3950 BELLAC RD.
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

BROWN, SONDR
3910 BELLAC RD.
TALLAHASSEE, FL 32303 US

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: SONDR BROWN

02/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CAVANAGH, SUSAN C
Address: 3950 BELLAC RD.
City-St-Zip: TALLAHASSEE, FL 32303

Title: DST () Delete
Name: CAVANAGH, JAMES E JR
Address: 3950 BELLAC RD.
City-St-Zip: TALLAHASSEE, FL 32303

Title: D () Delete
Name: HILL, ELIZABETH E
Address: 185 BELLAC RD.
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: BROWN, SONDR
Address: 3910 BELLAC RD.
City-St-Zip: TALLAHASSEE, FL 32303

Title: DST (X) Change () Addition
Name: BROWN, GREGORY
Address: 3910 BELLAC RD.
City-St-Zip: TALLAHASSEE, FL 32303

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

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: SONDR BROWN

PRES

02/20/2009

Electronic Signature of Signing Officer or Director

Date