

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 05, 2009**  
**Secretary of State**

DOCUMENT# N02309

Entity Name: HAZEL GARDENS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

8390 S.W. 3RD COURT  
OCALA, FL 344767183

**New Principal Place of Business:**

**Current Mailing Address:**

8390 S.W. 3RD COURT  
OCALA, FL 344767183

**New Mailing Address:**

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

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

GEHRING, PETE  
8405 SW 2ND COURT  
OCALA, FL 34476 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: VINTON, LARRY  
Address: 230 SW 84TH LN  
City-St-Zip: Ocala, FL 34476

Title: D ( ) Delete  
Name: NORMAN, HARRIET  
Address: 8345 SW 2ND CT  
City-St-Zip: Ocala, FL 34476

Title: TD ( ) Delete  
Name: HUTCHINSON, JAN  
Address: 8300 S.W. 2ND COURT  
City-St-Zip: Ocala, FL 34476

Title: D ( ) Delete  
Name: MILLER, DWANE  
Address: 8425 SW 3RD CT  
City-St-Zip: Ocala, FL 34476

Title: V ( ) Delete  
Name: OXENDINE, ROBERT  
Address: 195 SW 83RD ST  
City-St-Zip: Ocala, FL 34476

Title: D ( ) Delete  
Name: PENNUTO, DAVID  
Address: 8440 SW 2ND CT  
City-St-Zip: Ocala, FL 34476

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VP (X) Change ( ) Addition  
Name: VINTON, LARRY  
Address: 230 SW 84TH LN  
City-St-Zip: Ocala, FL 34476

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

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

Title: D (X) Change ( ) Addition  
Name: BARGE, WILLIAM  
Address: 8410 SW 3RD CT  
City-St-Zip: Ocala, FL 34476

Title: PD (X) Change ( ) Addition  
Name: GEHRING, CHARLES  
Address: 8405 SW 2ND COURT  
City-St-Zip: Ocala, FL 34476

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: JAN HUTCHINSON

TD

01/05/2009

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

\_\_\_\_\_  
Date