

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001486

FILED
Apr 10, 2009
Secretary of State

Entity Name: HANEY CREEK GREENWAY GROUP, INC.

Current Principal Place of Business:

2039 GINGER TERRACE
JENSEN BEACH, FL 34957

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1034
JENSEN BEACH, FL 34958

New Mailing Address:

2039 GINGER TERRACE
JENSEN BEACH, FL 34957

FEI Number: 26-0060176

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOPP, KEITH A
2039 NE GINGER TERR
JENSEN BEACH, FL 34957 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: CLEMMER, DAYNE E
Address: 1882 NE CRABTREE LN.
City-St-Zip: JENSEN BEACH, FL 34957

Title: D () Delete
Name: SLAWINSKI, STEVEN J
Address: 274 NE BLAIRWOOD TRACE
City-St-Zip: JENSEN BEACH, FL 34957

Title: P () Delete
Name: KOPP, KEITH A
Address: 2039 NE GINGER TERRACE
City-St-Zip: JENSEN BEACH, FL 34957

Title: V () Delete
Name: BERRY-KLAUSMEYER, LISA M
Address: 428 NE BAYBERRY LANE
City-St-Zip: JENSEN BEACH, FL 34957

Title: S () Delete
Name: CLEMMER, SARA C
Address: 1882 NE CRABTREE LN.
City-St-Zip: JENSEN BEACH, FL 34957

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: KOPP, TATIANA N
Address: 2039 NE GINGER TERRACE
City-St-Zip: JENSEN BEACH, FL 34957

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

Title: D (X) Change () Addition
Name: SRB, ANNA V
Address: 457 NW FETTERBUSH WAY
City-St-Zip: JENSEN BEACH, FL 34957

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: KEITH A KOPP

P

04/10/2009

Electronic Signature of Signing Officer or Director

Date