## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000002903

FILED Jun 06, 2005 Secretary of State

Entity Name: COMMUNITY ASSOCIATION FOR HAWK'S LANDING, PUD, INC.

Current Principal Place of Business: New Principal Place of Business:

4495 EMERALD VISTA 400 SOUTH CIRCLE DRIVE 2 BOYNTON BEACH, FL 33435

LAKE WORTH, FL 33461

Current Mailing Address: New Mailing Address:

4495 EMERALD VISTA 400 SOUTH CIRCLE DRUVE 2 BOYNTON BEACH, FL 33435

LAKE WORTH, FL 33461

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

HAWKINS, LAWRENCE B
9202 OLMSTEAD DR.
LAKE WORTH, FL 33467 US
STEPHENS-MILLER, STACY A
400 SOUTH CIRCLE DRIVE
BOYNTON BEACH, FL 33435 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: STACY A, STEPHENS-MILLER 06/06/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:PD( ) DeleteTitle:PD(X) Change ( ) AdditionName:HAWKINS, LAWRENCE BName:STEPHENS-MILLER, STACY AAddress:9202 OLMSTEAD DR.Address:400 SOUTH CIRCLE DRIVECity-St-Zip:LAKE WORTH, FL 33467City-St-Zip:BOYNTON BEACH, FL 33435

Title: VSTD ( ) Delete Title: VSTD ( X) Change ( ) Addition Name: ANGLE, CHRISTIAN J Name: THOMSEN, CYNTHIA L

Address: 717 NEW JERSEY ST. Address: 6894 SPIDER LILY LANE
City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: LANTANA, FL 33462

Title: VSD ( ) Delete Title: VSD (X) Change ( ) Addition

Name:THOMAS, STEPHEN CName:SMITH, MONICA TAddress:8415 NW 46TH DR.Address:416 SOUTH CIRCLE DRIVECity-St-Zip:CORAL SPRINGS, FL 33067City-St-Zip:BOYNTON BEACH, FL 33435

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STACY A. STEPHENS-MILLER PD 06/06/2005