## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000008272

FILED Jan 13, 2009 Secretary of State

Entity Name: HOLLY HILL ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:				New Principal Place of Business:			
1128 EAST DONEGAN AVE KISSIMMEE, FL 34744				1136EAST DONEGAN AVE KISSIMMEE, FL 34744			
Current Mailing Address:				New Mailing Address:			
1128 EAST DONEGAN AVE KISSIMMEE, FL 34744				1136EAST DONEGAN AVE KISSIMMEE, FL 34744			
FEI Number:	20-0321038	FEI Number Applied For()	FEI Nun	nber Not Appli	icable ( )	Certificate of Status Desi	red ( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
MORRIS, FRAYDA R 1128 EAST DONEGAN AVE KISSIMMEE, FL 34744 US				MORRIS, FRAYDA R 1136 EAST DONEGAN AVE KISSIMMEE, FL 34744 US			
The above in the State		ubmits this statement for the pu	ırpose o	f changing it	ts registered o	ffice or registered agen	t, or both,
SIGNATURE:				01/13/2009			
	Electron	ic Signature of Registered Agen	nt			Date	
OFFICERS AND DIRECTORS:				ADDITION	S/CHANGES	TO OFFICERS AND D	IRECTORS:
Title: Name: Address: City-St-Zip:	P () GOMEZ, LOREN 374 ASHFORD I DAVENPORT, F	DRIVE		Title: Name: Address: City-St-Zip:	( )	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP () LYNCH, TIM 334 ASHFORD I DAVENPORT, F			Title: Name: Address: City-St-Zip:	( )	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	T () NAVARRO, LISA 272 ASHFORD I DAVENPORT, F	DRIVE		Title: Name: Address: City-St-Zip:	( )	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	SD () RUSSELL, STEV 132 LOBELIA D DAVENPORT, F	RIVE		Title: Name: Address: City-St-Zip:	( )	Change ( ) Addition	
Title: Name: Address: City-St-Zip:				Title: Name: Address: City-St-Zip:	ALLEN, SHANN	NEGAN AVENUE	

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: LORENA GOMEZ P 01/13/2009