

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010475

FILED
Mar 07, 2006
Secretary of State

Entity Name: HIBISCUS BAY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 56-2473851 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR
C/O SENTRY MANAGEMENT INC
2180 WEST SR 434 SUITE 5000
LONGWOOD, FL 32779 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: PD () Delete
Name: LAWSON, ROBERT
Address: 5850 TG LEE BLVD STE 600
City-St-Zip: ORLANDO, FL 32822

Title: VPD () Delete
Name: AULD, DAVID V
Address: 5850 TG LEE BLVD STE 600
City-St-Zip: ORLANDO, FL 32822

Title: SD () Delete
Name: MURPHY, BRANDY
Address: 5850 TG LEE BLVD STE 600
City-St-Zip: ORLANDO, FL 32822

Title: D (X) Delete
Name: MOSS, DAVID
Address: 5850 TG LEE BLVD STE 600
City-St-Zip: ORLANDO, FL 32822

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HURST, BARBARA
Address: 10906 DERRINGER DR
City-St-Zip: ORLANDO, FL 32829

Title: VPD (X) Change () Addition
Name: CABRA, JUAN C
Address: 10907 DERRINGER DR
City-St-Zip: ORLANDO, FL 32829

Title: STD (X) Change () Addition
Name: ALLEN, JESSE
Address: 10824 DERRINGER DR
City-St-Zip: ORLANDO, FL 32829

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

I hereby certify that the information supplied with this filing does not qualify for the 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: BARBARA HURST

PD

03/07/2006

Electronic Signature of Signing Officer or Director

_____ Date