

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007658

FILED
Feb 14, 2009
Secretary of State

Entity Name: HABERSHAM HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4263 CHITTINGHAM DR
PACE, FL 32571

New Principal Place of Business:

4271 CHITTINGHAM DR
PACE, FL 32571

Current Mailing Address:

P.O. BOX 4234
MILTON, FL 32572

New Mailing Address:

FEI Number: 20-1482702

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZAJAC, CHRISTINE
4263 CHITTINGHAM DR
PACE, FL 32571 US

Name and Address of New Registered Agent:

SNYDER, ROBERT J T
4271 CHITTINGHAM DR
PACE, FL 32571 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: ROBERT J SNYDER

02/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: JONES, WAYNE
Address: 4266 ESSEX TERRACE CR
City-St-Zip: PACE, FL 32571

Title: DVP () Delete
Name: MITCHELL, STEVE
Address: 5960 CROMWELL CR
City-St-Zip: PACE, FL 32571

Title: DS () Delete
Name: HARTLEY, TENA L
Address: 4217 BYRNWYCK PL
City-St-Zip: PACE, FL 32571

Title: DT () Delete
Name: ZAJAC, CHRIS
Address: 4263 CHITTINGHAM DR
City-St-Zip: PACE, FL 32571

Title: D () Delete
Name: WHITE, MICHAEL J
Address: POB 286
City-St-Zip: PENSACOLA, FL 32591

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JONES, WAYNE
Address: 4266 ESSEX TERRACE CR
City-St-Zip: PACE, FL 32571

Title: VP (X) Change () Addition
Name: MITCHELL, STEVE
Address: 5960 CROMWELL DR
City-St-Zip: PACE, FL 32571

Title: S (X) Change () Addition
Name: BILBREY, CHRISTINE
Address: 5887 CROMWELL DR
City-St-Zip: PACE, FL 32571

Title: T (X) Change () Addition
Name: SNYDER, ROBERT
Address: 4271 CHITTINGHAM DR
City-St-Zip: PACE, FL 32571

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: ROBERT J SNYDER

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02/14/2009

Electronic Signature of Signing Officer or Director

Date