

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001783

FILED
Apr 10, 2007
Secretary of State

Entity Name: HATCHWOOD ESTATES PHASES III AND IV HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

4250 ALAFAYA TRAIL, SUITE 212-345
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

4250 ALAFAYA TRAIL, SUITE 212-345
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 20-2385825

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRUBE, BRUCE
4250 ALAFAYA TRAIL, SUITE 212-345
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

RELIABLE PROPERTY MANAGERS
4250 ALAFAYA TRAIL,
SUITE 212-345
OVIEDO, FL 32765 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: CURTIS BURNSIDE

04/10/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: STD () Delete
Name: FREY, BARRY E
Address: 455 DOUGLAS AVENUE, SUITE 1855
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: PD () Delete
Name: DAY, TERRY
Address: 455 DOUGLAS AVENUE, SUITE 1855
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: VD () Delete
Name: WILSON, RONALD E
Address: 455 DOUGLAS AVENUE, SUITE 1855
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: RIVERA, CARLOS
Address: 548 HATCHWOOD DR
City-St-Zip: HAINES CITY, FL 33844

Title: P (X) Change () Addition
Name: ANDREWS, BILL
Address: 128 SANDERLING DR
City-St-Zip: HAINES CITY, FL 33844

Title: S (X) Change () Addition
Name: JOHNS, PAULA
Address: 560 HATCHWOOD DR
City-St-Zip: HAINES CITY, FL 33844

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: BILL ANDREWS

P

04/10/2007

Electronic Signature of Signing Officer or Director

Date