

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001920

FILED  
Jan 03, 2011  
Secretary of State

**Entity Name:** HONTOON AREA CIVIC ASSOC, INC.

**Current Principal Place of Business:**

2608 MOCKINGBIRD VILLAGE  
DELAND, FL 32720

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1858  
DELAND, FL 32721

**New Mailing Address:**

**FEI Number:** 33-1110293

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MIX, STUART S JR  
2608 MOCKINGBIRD VILLAGE  
DELAND, FL 32720 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:** D  
**Name:** MIX, STUART S JR  
**Address:** 2235 RIVER RIDGE RD.  
**City-St-Zip:** DELAND, FL 32720

**Title:** D  
**Name:** BESSIRE, HARLEY  
**Address:** 2223 RIVER RIDGE ROAD  
**City-St-Zip:** DELAND, FL 32730

**Title:** D  
**Name:** MAGUIRE, MARY ANN  
**Address:** 1835 QUAIL HOLLOW DR.  
**City-St-Zip:** DELAND, FL 32720

**Title:** D  
**Name:** THOMAS, SUZANNE  
**Address:** 1625 LAKESIDE DR.  
**City-St-Zip:** DELAND, FL 32720

I hereby 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 all other like empowered.

**SIGNATURE:** STUART S. MIX, JR.

MR.

01/03/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date