

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 12, 2009
Secretary of State

DOCUMENT# N06000001755

Entity Name: HAWTHORNE VILLAGE CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**425 NORTH FEDERAL HIGHWAY
HALLANDALE BEACH, FL 33009**New Principal Place of Business:**9917 TURF WAY
ORLANDO, FL 32837**Current Mailing Address:**425 NORTH FEDERAL HIGHWAY
HALLANDALE BEACH, FL 33009**New Mailing Address:**9917 TURF WAY
ORLANDO, FL 32837**FEI Number:** 20-4720778**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**FRIEDMAN, HARRIS
425 NORTH FEDERAL HIGHWAY
HALLANDALE BEACH, FL 33009 US**Name and Address of New Registered Agent:**KATZMAN GARFINKEL ROSENBAUM
1501 NW 49TH STREET
2ND FLOOR
FORT LAUDERDALE, FL 33309 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: LEIGH C. KATZMAN

06/12/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HIRSCH, HERBERT
Address: 425 NORTH FEDERAL HIGHWAY
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: VD () Delete
Name: FRIEDMAN, HARRIS
Address: 425 NORTH FEDERAL HIGHWAY
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: STD () Delete
Name: BIRDMAN, LOUIS
Address: 425 NORTH FEDERAL HIGHWAY
City-St-Zip: HALLANDALE BEACH, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: UNGREDDA, DONATELLA
Address: 9917 TURF WAY
City-St-Zip: ORLANDO, FL 32837

Title: VD (X) Change () Addition
Name: ZIPP, GERALD
Address: 9917 TURF WAY
City-St-Zip: ORLANDO, FL 32837

Title: STD (X) Change () Addition
Name: VASCONCELOS, LUCAS
Address: 9917 TURF WAY
City-St-Zip: ORLANDO, FL 32837

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: DONATELLA UNGREDDA

PD

06/12/2009

Electronic Signature of Signing Officer or Director

Date