2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006297

FILED Apr 25, 2009 Secretary of State

Entity Name: THE VILLAGE AT HAILE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

5208 SW 91ST DRIVE SUITE D GAINESVILLE, FL 32608

Current Mailing Address: New Mailing Address:

5208 SW 91ST DRIVE SUITE D GAINESVILLE, FL 32608

FEI Number: 20-5157946 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TRIPPE REALTY MANAGEMENT, INC
5208 SW 91ST DRIVE
SUITE D
GAINESVILLE, FL 32608 US

CONNER, SARAH AGENT
5208 SW 91ST DRIVE
SUITE D
GAINESVILLE, FL 32608 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: SARAH CONNER, AGENT 04/25/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: P (X) Change () Addition

Name: DEREE, MICHAEL Name: KAHN, GAVIN

 Address:
 9127 SW 52ND AVENUE, SUITE 102
 Address:
 5025 SW 91ST CT H104

 City-St-Zip:
 GAINESVILLE, FL 32608
 City-St-Zip:
 GAINESVILLE, FL 32608

Title: VP () Delete Title: T (X) Change () Addition

 Name:
 DEREE, PAULETTE
 Name:
 PATTERSON, DAVID

 Address:
 9127 SW 52ND AVENUE, SUITE 102
 Address:
 5201-B SW 91ST DRIVE

 City-St-Zip:
 GAINESVILLE, FL 32608
 City-St-Zip:
 GAINESVILLE, FL 32608

Title: ST () Delete Title: S (X) Change () Addition

 Name:
 KAHN, GAVIN
 Name:
 DYKES, RICHARD A

 Address:
 5025 SW 91ST COURT, H104
 Address:
 5218-E SW 91ST DRIVE

 City-St-Zip:
 GAINESVILLE, FL 32608
 City-St-Zip:
 GAINESVILLE, FL 32608

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: GAVIN KAHN P 04/25/2009