

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006297

FILED  
Mar 22, 2011  
Secretary of State

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

**Current Principal Place of Business:**

5208 SW 91ST DRIVE  
SUITE D  
GAINESVILLE, FL 32608

**New Principal Place of Business:**

9158 SW 51ST ROAD  
SUITE J-103  
GAINESVILLE, FL 32608

**Current Mailing Address:**

5208 SW 91ST DRIVE  
SUITE D  
GAINESVILLE, FL 32608

**New Mailing Address:**

PO BOX 14121  
GAINESVILLE, FL 32604

**FEI Number:** 20-5157946

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MANAGEMENT SPECIALISTS SERVICES  
5208 SW 91ST DRIVE  
SUITE D  
GAINESVILLE, FL 32608 US

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

PREMIER MANAGEMENT ASSOCIATES, INC.  
9158 SW 51ST ROAD  
SUITE J-103  
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: DALE ROBERT MASON

03/22/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VP  
Name: KAHN, GAVIN  
Address: 9158 SW 51ST ROAD; SUITE J-103  
City-St-Zip: GAINESVILLE, FL 32608

Title: D  
Name: PATTERSON, DAVID REV.  
Address: 9158 SW 51ST ROAD; SUITE J-103  
City-St-Zip: GAINESVILLE, FL 32608

Title: S  
Name: DYKES, RICHARD A  
Address: 9158 SW 51ST ROAD; SUITE J-103  
City-St-Zip: GAINESVILLE, FL 32608

Title: T  
Name: HALE, DAVID  
Address: 9158 SW 51ST ROAD; SUITE J-103  
City-St-Zip: GAINESVILLE, FL 32608

Title: P  
Name: WOLTERS, JOE DUSTON  
Address: 9158 SW 51ST ROAD; SUITE J-103  
City-St-Zip: GAINESVILLE, FL 32608

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: J. DUSTON WOLTERS

P

03/22/2011

Electronic Signature of Signing Officer or Director

Date