

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001268

FILED  
Jan 11, 2011  
Secretary of State

**Entity Name:** HICKORY TREE BUSINESS CENTER CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

801 N MAGNOLIA AVE STE 101  
ORLANDO, FL 32803

**New Principal Place of Business:**

500 E JACKSON STREET  
ORLANDO, FL 32801

**Current Mailing Address:**

801 N MAGNOLIA AVE STE 101  
ORLANDO, FL 32803

**New Mailing Address:**

500 E JACKSON STREET  
ORLANDO, FL 32801

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THORNLEY, KELLY  
801 N MAGNOLIA AVE STE 101  
ORLANDO, FL 32803 US

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

CARLISI, JUDY  
500 E JACKSON STREET  
ORLANDO, FL 32801 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: JUDY CARLISI

01/11/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: CARLISI, JUDITH A  
Address: 500 E JACKSON STREET  
City-St-Zip: ORLANDO, FL 32801

Title: VD  
Name: KIENLE, RICHARD J  
Address: 500 E JACKSON STREET  
City-St-Zip: ORLANDO, FL 32801

Title: D  
Name: KIENLE, ERIC J  
Address: 500 E JACKSON STREET  
City-St-Zip: ORLANDO, FL 32801

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: JUDY CARLISI

PTSD

01/11/2011

Electronic Signature of Signing Officer or Director

Date