

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005421

FILED
Apr 29, 2009
Secretary of State

Entity Name: HARTSFIELD GARDENS HOMEOWNERS ASSOCIATION INC.

Current Principal Place of Business:

1184 CAPITAL CIRCLE NE
SUITE E
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

2820 INDUSTRIAL PLAZA DR
SUITE B
TALLAHASSEE, FL 32301 US

Current Mailing Address:

1607 VILLAGE SQ BLDV STE 8
TALLAHASSEE, FL 32309 US

New Mailing Address:

2820 INDUSTRIAL PLAZA DR
SUITE B
TALLAHASSEE, FL 32301 US

FEI Number: 26-0265981

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDDY, MARIE
1607 VILLAGE SQ BLVD STE 8
TALLAHASSEE, FL 32309 US

Name and Address of New Registered Agent:

MORRISON, CHARLES
2820 INDUSTRIAL PLAZA DR
SUITE B
TALLAHASSEE, FL 32301 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: CHARLES MORRISON

04/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MORRISON, STEVE
Address: 1184 CAPITAL CIRCLE NE, STE. E
City-St-Zip: TALLAHASSEE, FL 32301 US

Title: VP () Delete
Name: MORRISON, CHARLES
Address: 1184 CAPITAL CIRCLE NE, STE. E
City-St-Zip: TALLAHASSEE, FL 32301 US

Title: S () Delete
Name: MORRISON, CHRISTA
Address: 1184 CAPITAL CIRCLE NE, STE. E
City-St-Zip: TALLAHASSEE, FL 32301 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CHARLES MORRISON

VP

04/29/2009

Electronic Signature of Signing Officer or Director

Date