

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 06, 2009**  
**Secretary of State**

DOCUMENT# N07456

**Entity Name:** THE HAMLET AT BENTLEY PARK HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

3200 MONTROSE CIRCLE  
PALM HARBOR, FL 34684 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 643  
PALM HARBOR, FL 34682 US

**New Mailing Address:**

**FEI Number:** 59-2777343      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CIANFRONE, JOSEPH R  
1964 BAYSHORE BLVD  
DUNEDIN, FL 34698 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: HURLBURT, MICHAEL  
Address: 3200 MONTROSE CIR.  
City-St-Zip: PALM HARBOR, FL 34684

Title: D ( ) Delete  
Name: PRIMIANI, MICHAEL  
Address: 3185 MONTROSE PLACE  
City-St-Zip: PALM HARBOR, FL 34684

Title: D ( ) Delete  
Name: MILLS, GAIL  
Address: 3220 MONTROSE CIR.  
City-St-Zip: PALM HARBOR, FL 34684

Title: T ( ) Delete  
Name: BAKER, MELODIE  
Address: 2690 SAVOY LANE  
City-St-Zip: PALM HARBOR, FL 34684

Title: D ( ) Delete  
Name: HENRIKSEN, THOMAS  
Address: 3179 MONTROSE COURT  
City-St-Zip: PALM HARBOR, FL 34684

Title: V ( ) Delete  
Name: MCCREARY, KEVIN  
Address: 3265 MONTROSE CIRCLE  
City-St-Zip: PALM HARBOR, FL 34684

**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:

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: MELODIE BAKER

T

02/06/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date