

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Aug 24, 2011
Secretary of State**

DOCUMENT# N07959

Entity Name: HAZELWOOD VILLAS CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**2180 WEST SR 434, SUITE 5000
LONGWOOD, FL 327795044**New Principal Place of Business:**2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044**Current Mailing Address:**2180 WEST SR 434, SUITE 5000
LONGWOOD, FL 327795044**New Mailing Address:**2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044

FEI Number: 59-2776962

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:SOILEAU, JOHN L ESQ.
3490 NORTH US HWY 1
COCOA, FL 32923 US**Name and Address of New Registered Agent:**HART, JAMES W JR
SENTRY MANAGEMENT INC
2180 WEST SR 434 STE 5000
LONGWOOD, FL 32779 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: JAMES W HART JR

08/24/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: SMITH, CALVIN
Address: 2180 WEST SR 434 STE 5000
City-St-Zip: LONGWOOD, FL 32779

Title: SD
Name: EASLY, TERESA
Address: 2180 WEST SR 434 STE 5000
City-St-Zip: LONGWOOD, FL 32779

Title: D
Name: CARMEN, ROBERT
Address: 2180 WEST SR 434 STE 5000
City-St-Zip: LONGWOOD, FL 32779

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: CALVIN SMITH

PD

08/24/2011

Electronic Signature of Signing Officer or Director

Date