

# **2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N14476

**FILED**  
**Feb 18, 2013**  
**Secretary of State**

**Entity Name:** HAZEL GLEN COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

HAZEL GLEN NEIGHBORHOOD  
SANFORD, FL 32773 US

**New Principal Place of Business:**

HAZEL GLEN NEIGHBORHOOD  
109 HAZEL BLVD  
SANFORD, FL 32773 US

**Current Mailing Address:**

P.O. BOX 950547  
LAKE MARY, FL 327952526 US

**New Mailing Address:**

109 HAZEL BLVD  
SAFORD, FL 32773 US

**FEI Number:** 59-2870312

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SQUILLANTE, RHONDA L  
101NORTH COUNTRY CLUB ROAD  
STE 216  
LAKE MARY, FL 32746 US

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

HISE, LUCY L  
150 HAZEL BLVD  
SANFORD, FL 32773 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: LUCY L HISE

02/18/2013

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PR  
Name: LUCY, HISE  
Address: 150 HAZEL BLVD  
City-St-Zip: SANFORD, FL 32773

Title: SC  
Name: DUNN, STACY  
Address: 109 HAZEL BLVD  
City-St-Zip: SANFORD, FL 32773

Title: TR  
Name: MC DONNOUGH, ZEA  
Address: 120 HAZEL BLVD  
City-St-Zip: SANFORD, FL 32773

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: LUCY HISE

PR

02/18/2013

Electronic Signature of Signing Officer or Director

Date