

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2007 8:00 am
Secretary of State

05-02-2007 90051 041 ****61.25

DOCUMENT # N22265



1. Entity Name
HADFIELD GREENE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business
**5041 RINGWOOD MEADOW
SUITE 2
SARASOTA, FL 34235**

Mailing Address
**5041 RINGWOOD MEADOW
SUITE 2
SARASOTA, FL 34235**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02142007

Chg-NP

CR2E037 (12/06)

4. FEI Number

65-0061871

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**PAMI MANAGEMENT, INC
5041 RINGWOOD MEADOW
SUITE 2
SARASOTA, FL 34235**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

7. Name and Address of New Registered Agent

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
WILSON, DONALD
3449 HADFIELD GREEN
SARASOTA, FL 34235** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DS
O'CONNOR, THOMAS F
3436 HADFIELD GREENE
SARASOTA, FL 34235** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
FRIEDLANDER, ROBERT
3336 HADFIELD GREENE
SARASOTA, FL** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
HIRSCHY, DALE
3484 HADFIELD GREENE
SARASOTA, FL 34235** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DT
TEREK, DONALD
3311 HADFIELD GREENE
SARASOTA, FL 34235** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
HIRSCHY, DALE
3484 HADFIELD GREENE
SARASOTA, FL 34235** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
LEISENERING, ROBERT
3477 HADFIELD GREENE
SARASOTA, FL 34235** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

R. Friedlander **R. FRIEDLANDER**

4/25/07