2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # N31559

HAWKSNEST AT METROWEST HOMEOWNERS' ASSOCIATION, INC.



Mar 12, 2007 8:00 am Secretary of State 03-12-2007 90104 038 ****61.25

FILED

					1000						
C/O ROBERT HARA C/O 118 N. WYMORE RD. 118			118 N. WYMO	ling Address D Robert Hara 8 N. Wymore Rd. Nter Park, Fl. 32789			d (\$50)((8) 00 0	(1191 (19 51 6 1151 6 1176)	1811 ALEKI 2188 ALEK	. a i bir a karı a a a	
2. Principal Place of Business - No P.O. Box # 3. Mai				ailing Address							
Suite, Apt. #, etc. Si			Suite, Apt. #	Suite, Apt. #, etc.			01092007	Chg-NP	CR2E03	7 (12/06)	
City & State			City & State	City & State			4. FEI Numbe 59-3005				oplied For
Zip Country Z			Zip	ip Country			5. Certificate	of Status Desired		8.75 Ade	ditional
	6. Name and Add	ress of Current R	ealstered Agent	ed Agent			7. Name and Address of New Registered Agent				
					Name		** ************************************			.	
HARA, ROBERT HARA MANAGEMENT, INC							(P.O. Box Number is Not Acceptable)				
	MORE RD. PARK, FL 32789					•			· <u></u>		
				City			FL Zip Code				
	a named entity submits tions of registered ager		the purpose of ch	anging its regist	ered offi ce o	r register	ed agent, or both	h, in the State of I	Florida. łam f	amiliar with,	and accept
SIGNATURE	Signature, typed or printed has	me of registered agent an	d title if applicable.	(NOTE: Registe	ered Agent signe	ture required	when reinstating)		DATE		
											
	Filing Fee is \$6° Due by May 1, 2			ection Campaign ust Fund Contrib	_		\$5.00 May Be Added to Fees	· 1	Make check orida Depart		
10.	OF	FICERS AND DIRE	CTORS	1°	ı.	A	ADDITIONS/CHA	NGES TO OFFIC	ERS AND DIF	ECTORS IN	1 10
TITLE	PD		[25 -0	elete Tr	TLE	5D				Change	Addition
NAME	CHAUFFE, BOB		-		ME		5.00	a 1			
STREET ADDRESS	7208 HAWKSNES	T BLVD		STREET ADDRESS		1500	a siegi	K Bull L	ano		
CITY-ST-ZIP	ORLANDO, FL 32				TY-ST-ZIP	Carl	55 BIAC	FL 32	225		
TITLE	VPD				TLE	PD	ration)	r C 38	<u> </u>	<u> </u>	
NAME	WILSON, RAY		יים		UME		103186	_		Change	Addition
STREET ADDRESS	7271 HAWKSNEST BLVD					Ray Wilson 1271 Howksnest Bl		Ird.		!	
CITY-ST-ZIP	ORLANDO, FL 32			Crty							
	TD					Im	ando r	13383	35		—
TITLE NAME	TAYLOR, GERDI				TLE					Change	[] Addition
STREET ADDRESS	7267 HAWKSNES	T RI VO			ME ADDRESS		 a			- 	1
CITY-\$T-ZIP	ORLANDO, FL 32				TY-ST-ZIP	ļ		•		<u> </u>	
	S			nieto TII	ILE VPD	0	1			Da Channa	- I Addition
TITLE NAME	NEWCOMER, RIC	ĸ	- u			 K・C ・	KNewe	ine	. .	Change	Addition
STREET ADDRESS	7283 HAWKSNES				REET ADDRESS	728	3 Haw	Kenest	Blud.	:	ŀ
CITY-ST-ZIP	ORLANDO, FL 32				TY-ST-ZIP	cial	o do	Kunest FL 328	- 2 -		1
				-l-t- III	rle	UYL	unao,	<u> </u>	- 23	Channe	T Addition
TITLE	O COMES LISAM				ME ME	1				☐ Change	Addition
MANE GRIMES, LISA M			STREET ADDRESS		i					}	
STREET ADDRESS CITY-ST-ZIP				SIRE:		1					- 1
	ONLANDO, FL 32					1					
TITLE	{			•	TLE VME		. :,			☐ Change	☐ Addition {
NAME				■ N/	WIL	1		•			
CIDCET FORGES	į				DEET ADPADEGE						1
STREET ADDRESS CITY-ST-ZIP				ST	REET ADDRESS TY-ST-ZIP						

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:	Gordi	Taylor	GerdiTaylor	2-26-07	407-253-4260	
· 1 s	IGNATURE AND TYPE	D OR PRINTED NAME OF SI	GNING OFFICER OR DIRECTOR	Date	Daytime Phone #	