

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32442

FILED
Mar 05, 2009
Secretary of State

Entity Name: HARTRIDGE HILLS HOME OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

317 HARTRIDGE HILLS BLVD
WINTER HAVEN, FL 33881 US

New Principal Place of Business:

Current Mailing Address:

317 HARTRIDGE HILLS BLVD
WINTER HAVEN, FL 33881 US

New Mailing Address:

FEI Number: 65-0167240 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLLINS, JOHN P
59 LAKE MORTON DRIVE
LAKELAND, FL 33802 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: PD () Delete
Name: BURR, WILLIAM
Address: 595 6TH ST N W
City-St-Zip: WINTER HAVEN, FL 33881

Title: VD () Delete
Name: STEPHENSON, BRUCE
Address: 239 HARTRIDGE HIL DR NW
City-St-Zip: WINTER HAVEN, FL 33881

Title: SD () Delete
Name: HAUSY, MARILYN
Address: 206 N LK HARTRIDGE DR
City-St-Zip: WINTER HAVEN, FL 33881

Title: TD () Delete
Name: THOMAS, MARY
Address: 226 HILL CT
City-St-Zip: WINTER HAVEN, FL 33881

Title: D () Delete
Name: HABRAKEN, JOE
Address: 244 HILL CT
City-St-Zip: WINTER HAVEN, FL 33881

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BIZIER, PAUL
Address: PO BOX 543
City-St-Zip: WINTER HAVEN, FL 33881

Title: VD (X) Change () Addition
Name: SORRELL, ROBERT
Address: 222 LAKE PANSY DRIVE
City-St-Zip: WINTER HAVEN, FL 33881

Title: SD (X) Change () Addition
Name: HABRAKEN, JOSEPH W
Address: 244 HILL COURT NW
City-St-Zip: WINTER HAVEN, FL 33881

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: SHEIL, PATRICK
Address: 50 WEST LAKE HAMILTON DRIVE NW
City-St-Zip: WINTER HAVEN, FL 33881

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: JOSEPH W. HABRAKEN

SD

03/05/2009

Electronic Signature of Signing Officer or Director

Date