

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33104

FILED
Apr 06, 2009
Secretary of State

Entity Name: HALLMARK HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

14525 90TH AVE
SEMINOLE, FL 33776

New Principal Place of Business:

Current Mailing Address:

14525 90TH AVE
SEMINOLE, FL 33776

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

RESING, PATRICK A
14525 90TH AVE
SEMINOLE, FL 33776 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: RESING, PATRICK A
Address: 14525 90TH AVE
City-St-Zip: SEMINOLE, FL 33776

Title: TD () Delete
Name: JONES, RAY
Address: 14533 90TH AVE
City-St-Zip: SEMINOLE, FL 33776

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: PATRICK A RESING

PD

04/06/2009

Electronic Signature of Signing Officer or Director

_____ Date