

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34923

FILED
Jan 31, 2009
Secretary of State

Entity Name: THE ESTATES OF HAWLEY PROPERTY OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

C/O B ALLEN LOCKE
5345 S 25 ST
FT. PIERCE, FL 34981 US

New Principal Place of Business:

Current Mailing Address:

C/O ALLEN LOCKE
5345 S 25 ST
FT. PIERCE, FL 34981 US

New Mailing Address:

C/O B ALLEN LOCKE
5345 S 25 ST
FT. PIERCE, FL 34981 US

FEI Number: 65-0202045

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOCKE, B. A
5345 S 25TH ST
FT. PIERCE, FL 34981 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: DP () Delete
Name: LOCKE, B A
Address: 5345 S. 25TH STREET
City-St-Zip: FT PIERCE, FL

Title: DV () Delete
Name: LOCKE, MARY
Address: 5345 S 25 ST
City-St-Zip: FT PIERCE, FL

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: B.A. LOCKE

DP

01/31/2009

Electronic Signature of Signing Officer or Director

Date