

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37844

FILED
Mar 10, 2009
Secretary of State

Entity Name: HOOD LANDING LAKES OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

PROFESSIONAL COMMUNITY MGMT INC
786 BLANDING BLVD 118
ORANGE PARK, FL 32065 US

New Principal Place of Business:

Current Mailing Address:

PROFESSIONAL COMMUNITY MGMT INC
786 BLANDING BLVD 118
ORANGE PARK, FL 32065 US

New Mailing Address:

FEI Number: 59-3045887

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PERRY, ALAN
786 BLANDING BLVD #118
ORANGE PARK, FL 32065 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: ERNEST, ANTHONY
Address: 12176 BANYAN TREE DR.
City-St-Zip: JACKSONVILLE, FL 32258

Title: VPT () Delete
Name: MCCRAKEN, PAUL
Address: 12136 BANYAN TREE D R
City-St-Zip: JACKSONVILLE, FL 32258

Title: SD () Delete
Name: MCCracken, MARK
Address: 12139 BANYAN TREE DR.
City-St-Zip: JACKSONVILLE, FL 32258

Title: D (X) Delete
Name: MAGUIRE, ROBERT
Address: 4217 SHALLOW LAKE DR.
City-St-Zip: JACKSONVILLE, FL 32258

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: ALAN PERRY

RA

03/10/2009

Electronic Signature of Signing Officer or Director

Date