2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40064

FILED Feb 17, 2008 Secretary of State

Entity Name: THE HAILE PLANTATION WEST ASSOCIATION, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
SUITE A	1ST TERRACE		SUITE D	91ST DRIVE	
GAINESVIL	LE, F 32608	US	GAINESVII	LLE, FL 32608 US	
Current Mailing Address:			New Maili	New Mailing Address:	
SUITE A	1ST TERRACE .LE, F 32608	US	SUITE D	91ST DRIVE LLE, FL 32608 US	
El Number:	59-3032668	FEI Number Applied For () FE	l Number Not Appl	licable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
MANAGEMENT SPECIALISTS 5341 SW 91ST TERRACE, SUITE A GAINESVILLE, FL 32608 US The above named entity submits this statement for the purpose of			5208 SW 9 SUITE D GAINESVII	GAINESVILLE, FL 32608 US	
n the State of Florida.					
SIGNATURE:				02/17/2008	
Electronic Signature of Registered Agent Date					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Fitle: Name: Address: City-St-Zip:	DP () E PETTRY, DON 4707 SW. 103 RI GAINESVILLE, FI		Title: Name: Address: City-St-Zip:	D (X) Change () Addition PHILPOT, LAURIE 9214 SW 42ND LANE GAINESVILLE, FL 32608	
Fitle: Name: Address: City-St-Zip:	D ()E WOLF, ISABEL 3559 SW 8TH ST GAINESVILLE, FI		Title: Name: Address: City-St-Zip:	D (X) Change () Addition BRADY, JUNE 9214 SW 42ND LANE GAINESVILLE, FL 32608	
Fitle: Name: Address: City-St-Zip:	T () E BRADY, JUNE 4939 SW 95TH T GAINESVILLE, FI		Title: Name: Address: City-St-Zip:	D (X) Change () Addition BRISTOL, JUNE 3005 SW 98TH WAY GAINESVILLE, FL 32608	
Fitle: Name: Address: City-St-Zip:	P () E PHILPOT, LAURII 9214 SW 42ND L GAINESVILLE, FI	ANE	Title: Name: Address: City-St-Zip:	D (X) Change () Addition HOLLINGER, RICHARD 9513 SW 51ST ROAD GAINESVILLE, FL 32608	
Fitle: Name: Address: City-St-Zip:	()[Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition BELLUCCI, TOM 4024 SW 98TH TERRACE GAINESVILLE, FL 32608	
Fitle: Name: Address: Dity-St-Zip:	()[Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition LAW, ALISON 4524 SW 105TH DRIVE GAINESVILLE, FL 32608	

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: LAURIE PHILPOT D 02/17/2008