

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 20, 2009
Secretary of State**

DOCUMENT# N44199

Entity Name: HWD ASSOCIATION, INC.

Current Principal Place of Business:

2037 N. POINT ALEXIS
TARPON SPRINGS, FL 34689

New Principal Place of Business:

Current Mailing Address:

2037 N. POINT ALEXIS
TARPON SPRINGS, FL 34689

New Mailing Address:

FEI Number: 59-0715528 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHOLL, DONALD E.
115 SOUTH SPRING BLVD.
TARPON SPRINGS, FL 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: STD () Delete
Name: WEISER, NORMAN
Address: 2035 NORTH POINTE ALEXIS DR
City-St-Zip: TARPON SPRINGS, FL 34689

Title: VD () Delete
Name: MINICI, JAMES
Address: 2039 N. POINTE ALEXIS
City-St-Zip: TARPON SPRINGS, FL 34689

Title: PD () Delete
Name: HASISK, LARRY
Address: 2037 N. POINTE ALEXIS DR
City-St-Zip: TARPON SPRINGS, FL 34689

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: PD (X) Change () Addition
Name: HASIAK, LARRY
Address: 2037 N. POINTE ALEXIS DR
City-St-Zip: TARPON SPRINGS, FL 34689

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: LARRY HASIAK

PD

02/20/2009

Electronic Signature of Signing Officer or Director

Date