2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2009
Secretary of State

DOCUMENT# N46947

Entity Name: OLDE HICKORY SINGLE FAMILY III HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

14360 HICKORY FAIRWAY CT
FT. MYERS, FL 33912 US

New Principal Place of Business:

14400 HICKORY FAIRWAY CT
FT. MYERS, FL 33912 US

Current Mailing Address:

14360 HICKORY FAIRWAY CT
FT. MYERS, FL 33912 US

New Mailing Address:

14400 HICKORY FAIRWAY CT
FT. MYERS, FL 33912 US

FEI Number: 65-0313108 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GAYLOR, CAROLYN
14340 HICKORY FAIRWAY CT
FORT MYERS, FL 33912 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: BLOEDEL, ROBERT
Address: 14360 HICKORY FAIRWAY CT
City-St-Zip: FORT MYERS, FL 33912

Title: VP ( ) Delete
Name: LUREY, SANDRA
Address: 9370 WHITE HICKORY FAIRWAY CT
City-St-Zip: FORT MYERS, FL 33912

Title: ST ( ) Delete
Name: GAYLOR, CAROLYN
Address: 14340 HICKORY FAIRWAY CT
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: HEXNER, PETRONELLA
Address: 14400 HICKORY FAIRWAY CT
City-St-Zip: FORT MYERS, FL 33912

Title: VP (X) Change ( ) Addition
Name: GAYLOR, GARY L
Address: 14340 HICKORY FAIRWAY CT
City-St-Zip: FORT MYERS, FL 33912

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: CAROLYN GAYLOR ST 03/24/2009

Electronic Signature of Signing Officer or Director — Date