

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000763

FILED  
Feb 09, 2010  
Secretary of State

**Entity Name:** HAWTHORNE MEMORIAL FUND, INC.

**Current Principal Place of Business:**

100 HAWTHORNE BLVD.  
LEESBURG, FL 34748

**New Principal Place of Business:**

**Current Mailing Address:**

158 AZALEA TRAIL  
LEESBURG, FL 34748

**New Mailing Address:**

**FEI Number:** 59-3166903

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SEWELL, STEPHEN G  
907 WEBSTER STREET  
LEESBURG, FL 34748 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: P  
Name: DIEDEN, ROBERT  
Address: 125 ROYAL PALM DR  
City-St-Zip: LEESBURG, FL 34748

Title: T  
Name: BLOUNT, RICHARD  
Address: 158 AZALEA TRAIL  
City-St-Zip: LEESBURG, FL 34748

Title: D  
Name: SICKELS, MARJORIE  
Address: 128 TAMARISK WAY  
City-St-Zip: LEESBURG, FL

Title: VP  
Name: NOWAKOWSKI, DONALD A  
Address: 112 WILLOW LANE  
City-St-Zip: LEESBURG, FL 34748

Title: D  
Name: WOLF, GEORGE  
Address: 167 JACARANDA STREET  
City-St-Zip: LEESBURG, FL 34748

Title: S  
Name: WEAVER, CONNIE  
Address: 125 CAMELIA TRAIL  
City-St-Zip: LESBURG, FL 34748

I hereby 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 all other like empowered.

SIGNATURE: RICHARD E. BLOUNT

T

02/09/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date