2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9300000117

FILED Apr 30, 2006 Secretary of State

Entity Name: HARTSFIELD PLANTATION HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 431 WAVERLY ROAD TALLAHASSEE, FL 32312 US **Current Mailing Address: New Mailing Address:** 431 WAVERLY ROAD TALLAHASSEE, FL 32312 US FEI Number: 59-3176487 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ISAACS, DAN L 431 WAVERLY ROAD TALLAHASSEE, FL 32312 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition TERRELL, JOHN E TERRELL, JOHN E Name: Name: 2000 HICKORY TREE LANE Address: 2000 HICKORY TREE LANE Address: City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: TALLAHASSEE, FL 32303 Title: Title: () Delete () Change () Addition NORTHRUP, HELENA Name: Name: Address: 2947 FOX RUN COURT Address: City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: Title: () Delete Title: () Change () Addition KNUDSON, ALAN Name: Name: 2246 HICKORY TREE LANE Address: Address: City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: Title: SD () Delete Title: () Change () Addition MCGUIRE, WILLIAM Name: Name: Address: 2945 SETTING SUN TR Address: City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: Title: DP () Delete Title: (X) Change () Addition ANDERSON, ROBERT CHAVIANO, PETE Name: Name: 2016 HICKORY TREE LANE 2007 HICKORY TREE LANE Address: Address: City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: TALLAHASSEE, FL 32303 Title: () Delete Title: () Change () Addition SULLIVAN, STEPHEN Name: Name: Address: 1928 SADDLEBROOK DRIVE Address: TALLAHASSEE, FL 32312 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 KNUDSON T 04/30/2006