

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002221

FILED
Apr 14, 2011
Secretary of State

Entity Name: HICKORY WALK NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

5208 SW 91ST DRIVE
SUITE D
GAINESVILLE, FL 32608 US

New Principal Place of Business:

Current Mailing Address:

5208 SW 91ST DRIVE
SUITE D
GAINESVILLE, FL 32608 US

New Mailing Address:

FEI Number: 59-3198358

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANAGEMENT SPECIALISTS SERVICES
5208 SW 91ST DR.
SUITE D
GAINESVILLE, FL 32608 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: VP
Name: MITCHELL, CHARLES PHILIP
Address: 5208 SW 91ST DR, SUITE D
City-St-Zip: GAINESVILLE, FL 32608

Title: P
Name: BEARDEN, JOAN L
Address: 5208 SW 91ST DR, SUITE D
City-St-Zip: GAINESVILLE, FL 32608

Title: D
Name: NELSON, ALICIA C
Address: 5208 SW 91ST DR, SUITE D
City-St-Zip: GAINESVILLE, FL 32608

Title: T
Name: DESJARDIN, JIM
Address: 5208 SW 91ST DR, SUITE D
City-St-Zip: GAINESVILLE, FL 32608

Title: S
Name: FULFORD, SUSAN
Address: 5208 SW 91ST DR, SUITE D
City-St-Zip: GAINESVILLE, FL 32608

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: MANAGEMENT SPECIALISTS SERVICES

MGR

04/14/2011

Electronic Signature of Signing Officer or Director

Date