

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004583

FILED  
Mar 18, 2010  
Secretary of State

**Entity Name:** THE HAMLET AT MAITLAND HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1097 HAMLET DRIVE  
MAITLAND, FL 32751 US

**New Principal Place of Business:**

**Current Mailing Address:**

860 NORTH S.R. 434  
STE. 1009  
ALTAMONTE SPRINGS, FL 32714

**New Mailing Address:**

**FEI Number:** 59-3229203      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CAMPBELL, MARILYN  
860 NORTH S.R. 434  
STE. 1009  
ALTAMONTE SPRINGS, FL 32714 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: BARTHOLOMEW, CLETUS  
Address: 979 HAMLET CT.  
City-St-Zip: MAITLAND, FL 32751 US

Title: T  
Name: CRAWLEY, CHARLES JR  
Address: 996 HAMLET CT  
City-St-Zip: MAITLAND, FL 32751 US

Title: S  
Name: PATTERSON, ALBERTA  
Address: 1097 HAMLET DR  
City-St-Zip: MAITLAND, FL 32751 US

Title: MGR  
Name: STRODE, CHUCK MGR  
Address: 860 NORTH S.R. 434, SUITE 1009  
City-St-Zip: ALTAMONTE SPRINGS, FL 32814 US

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: CHUCK STRODE

MGR

03/18/2010

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

\_\_\_\_\_  
Date