

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001622

FILED  
Jan 09, 2009  
Secretary of State

**Entity Name:** SLEEPY HOLLOW PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

2635 SLEEPY HOLLOW LN  
LAKELAND, FL 33810 US

**New Principal Place of Business:**

**Current Mailing Address:**

2635 SLEEPY HOLLOW LN  
LAKELAND, FL 33810 US

**New Mailing Address:**

**FEI Number:** 59-3278159

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOHNSON, WILLIAM H  
2635 SLEEPY HOLLOW LN  
LAKELAND, FL 33810 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: DP ( ) Delete  
Name: JOHNSON, WILLIAM  
Address: 2635 SLEEPY HOLLOW LANE  
City-St-Zip: LAKELAND, FL 33810

Title: DV ( ) Delete  
Name: BAILEY, ROSEMARY  
Address: 2601 SLEEPY HOLLOW LANE  
City-St-Zip: LAKELAND, FL 33810

Title: DST ( ) Delete  
Name: BLACK, DEAN  
Address: 2617 SLEEPY HOLLOW LANE  
City-St-Zip: LAKELAND, FL 33810

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: WILLIAM H. JOHNSON

CEO

01/09/2009

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

\_\_\_\_\_  
Date