

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Morham

Secretary of State

NONPROFIT CORPORATIONS

1996-1494

64016
B-60001-0

DOCUMENT # N95000002023 (8)

1. Corporation Name

HAILE COMMUNITY ASSOCIATION, INC.



Principal Place of Business

Mailing Address

3616 N.W. 186TH STREET
NEWBERRY FL 32669

3616 N.W. 186TH STREET
NEWBERRY FL 32669

3. Date Incorporated or Qualified
04/27/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

Applied For

☒ Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

23

28

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

24

25

29

Zip

Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SAARINEN, ARTHUR
3616 N.W. 186TH STREET
NEWBERRY FL 32669

81

Name John McCall

82

Street Address (P.O. Box Number is Not Acceptable)

4115 NW 186 St

83

84

City Newberry

FL

Zip Code

32669

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0508, Florida Statutes.

SIGNATURE

John McCall

John McCall

4-30-96

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE

NAME ALEXAITIS, JOHN
STREET ADDRESS 5113 N.W. 234TH ST.
CITY - ST - ZIP NEWBERRY FL 32669

1.1 TITLE P/D ☐ Change ☒ Addition

1.2 NAME John McCall
1.3 STREET ADDRESS 4115 NW 186 St
1.4 CITY - ST - ZIP Newberry FL 32669

TITLE D ☐ DELETE

NAME DECUBELLIS, DENISE
STREET ADDRESS 4211 N.W. 186TH ST.
CITY - ST - ZIP NEWBERRY FL 32669

2.1 TITLE T/D ☐ Change ☒ Addition

2.2 NAME Minu Simmons
2.3 STREET ADDRESS 18330 NW 39 Place
2.4 CITY - ST - ZIP Newberry FL 32669

TITLE D ☒ DELETE

NAME GARSON, MIKE
STREET ADDRESS 18515 N.W. 28TH PL
CITY - ST - ZIP NEWBERRY FL 32669

3.1 TITLE S/D ☐ Change ☒ Addition

3.2 NAME Jana Middleton
3.3 STREET ADDRESS 5204 NW 234 St
3.4 CITY - ST - ZIP Newberry FL 32669

TITLE D ☐ DELETE

NAME SAARINEN, ARTHUR
STREET ADDRESS 3616 N.W. 186TH STREET
CITY - ST - ZIP NEWBERRY FL 32669

4.1 TITLE D ☐ Change ☒ Addition

4.2 NAME Peter Walther
4.3 STREET ADDRESS 1647 NW 187 St
4.4 CITY - ST - ZIP Alachua FL 32615

TITLE D ☒ DELETE

NAME SANDERS, JEANNE
STREET ADDRESS 23807 N.W. 51ST PL
CITY - ST - ZIP NEWBERRY FL 32669

5.1 TITLE D ☐ Change ☒ Addition

5.2 NAME Candace McCall
5.3 STREET ADDRESS 4115 NW 186 St
5.4 CITY - ST - ZIP Newberry FL 32669

TITLE D ☒ DELETE

NAME SCHUTT, VICKI
STREET ADDRESS 21311 N.W. 52ND PL
CITY - ST - ZIP NEWBERRY FL 32669

6.1 TITLE D ☐ Change ☒ Addition

6.2 NAME Phyllis Saarinen
6.3 STREET ADDRESS 3616 186 St
6.4 CITY - ST - ZIP Newberry FL 32669

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Jana K Middleton

JANA K MIDDLETON

5/9/96

(352)

472-9469

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)

N95000002023

2-2

Haile Community Association, Inc.
PO Box 1074
Newberry, FL 32669

Document Number N95000002023

13 Additions/Changes to Officers and Directors in 12

- | | | | |
|----|----------------|-------------------|----------|
| 7. | Title | D/VP | Addition |
| | Name | Terri Blakeslee | |
| | Street Address | 1310 NW CR 235 | |
| | City-ST-Zip | Newberry FI 32669 | |
| 8. | Title | D | Addition |
| | Name | Steve DeCubellis | |
| | Street Address | 4211 NW 186 St | |
| | City-ST-Zip | Newberry FL 32669 | |