2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 03, 2009
Secretary of State

DOCUMENT# N96000002301

Entity Name: HILLTOP VILLAGE RESIDENT ASSOCIATION, INC.

Current Principal Place of Business:

1646 W. 45TH ST.
JACKSONVILLE, FL 32208

New Principal Place of Business:

Current Mailing Address:

126 W. ADAMS STREET
JACKSONVILLE, FL 32202

New Mailing Address:

1646 W 45TH
APT 215 C
JACKSONVILLE, FL 32208

FEI Number: 59-3400908 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MILLER, CAROL S
126 W. ADAMS STREET
JACKSONVILLE, FL 32202 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:	PD	( ) Delete
Name:	HERNDON, GLENDA	
Address:	1646 W. 45TH STREET #215	
City-St-Zip:	JACKSONVILLE, FL 32208	
Title:	D	( ) Delete
Name:	JONES, ERICA	
Address:	1646 W 45TH ST, #106	
City-St-Zip:	JACKSONVILLE, FL 32208	
Title:	D	( ) Delete
Name:	BETTY, FRAZIER	
Address:	1646 W. 45TH STREE #202	
City-St-Zip:	JACKSONVILLE, FL 32208	
Title:	D	( ) Delete
Name:	RUSS, NATALIE	
Address:	1646 W 45TH ST, APT 327	
City-St-Zip:	JACKSONVILLE, FL 32208	
Title:	TD	( ) Delete
Name:	BROWN, ANTOINETT	
Address:	1646 W. 45TH STREET #219	
City-St-Zip:	JACKSONVILLE, FL 32208	
Title:	D	( ) Delete
Name:	MATTHEWS, ELIZABETH	
Address:	1646 W 45 ST., APT. 175 BLDG M	
City-St-Zip:	JACKSONVILLE, FL 32208	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	BETTY, FRAZIER	
Address:	1646 W. 45TH STREE #281	
City-St-Zip:	JACKSONVILLE, FL 32208	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	PRESTON, KEIRA	
Address:	1646 W 45 ST., APT. #148	
City-St-Zip:	JACKSONVILLE, FL 32208	

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: GLENDA HERNDON PD 08/03/2009
Electronic Signature of Signing Officer or Director — Date