

**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 17, 2005  
Secretary of State**

DOCUMENT# N96000002614

**Entity Name:** TALLAHASSEE HAWKS LANDING HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

3032 HAWKS LANDING DRIVE  
TALLAHASSEE, FL 32309

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 1567  
TALLAHASSEE, FL 323021567

**New Mailing Address:**

**FEI Number:** 59-3599394      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

WHARTON, JOHN L  
2548 BLAIRSTONE PINES DRIVE  
TALLAHASSEE, FL 32301      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: WHARTON, JOHN L  
Address: 3032 HAWKS LANDING DRIVE  
City-St-Zip: TALLAHASSEE, FL 32309

Title: VPD      ( ) Delete  
Name: SACHS, RON  
Address: 3020 HAWKS LANDING DRIVE  
City-St-Zip: TALLAHASSEE, FL 32309

Title: SD      ( ) Delete  
Name: HACKMEYER, MICHELE  
Address: 3017 HAWKS LANDING DRIVE  
City-St-Zip: TALLAHASSEE, FL 32309

Title: TD      ( ) Delete  
Name: HARRISON, THOMAS G  
Address: 3215 SHADY HAWK LANE  
City-St-Zip: TALLAHASSEE, FL 32309

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

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

Title: VPD      (X) Change ( ) Addition  
Name: MCRAE, SUSAN  
Address: 3055 HAWKS LANDING DRIVE  
City-St-Zip: TALLAHASSEE, FL 32309

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 for the exemption stated in Section 119.07(3)(i), 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: THOMAS G. HARRISON

TD

04/17/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date