

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005463

FILED  
Feb 25, 2009  
Secretary of State

**Entity Name:** HART LAKE HILLS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

400 EAGLE LAKE LOOP RD  
WINTER HAVEN, FL 33880 US

**New Principal Place of Business:**

604 HART LAKE DRIVE  
WINTER HAVEN, FL 33884 US

**Current Mailing Address:**

P. O. BOX 3518  
WINTER HAVEN, FL 33885 US

**New Mailing Address:**

**FEI Number:** 59-3539710      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

HUOT, PAUL  
604 HART LAKE DR.  
WINTER HAVEN, FL 33884 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: D ( ) Delete  
Name: PITTS, JANET  
Address: 674 HART LAKE DR  
City-St-Zip: WINTER HAVEN, FL 33884

Title: P ( ) Delete  
Name: ESPINOSA, ENOCH  
Address: 649 HART LAKE DR  
City-St-Zip: WINTER HAVEN, FL 33884

Title: VP ( ) Delete  
Name: AKIN, CHAD  
Address: 644 HART LAKE DR  
City-St-Zip: WINTER HAVEN, FL 33884

Title: DT ( ) Delete  
Name: HUOT, PAUL  
Address: 604 HART LAKE DR  
City-St-Zip: WINTER HAVEN, FL 33884

Title: S ( ) Delete  
Name: HUOT, JEANNINE  
Address: 604 HART LAKE DR  
City-St-Zip: WINTER HAVEN, FL 33884

Title: D ( ) Delete  
Name: GIBSON, SCOTT  
Address: 669 HART LAKE DR  
City-St-Zip: WINTER HAVEN, FL 33884

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

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

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

Title: VP (X) Change ( ) Addition  
Name: INSUA, TONY  
Address: 606 HART LAKE DR  
City-St-Zip: WINTER HAVEN, FL 33884

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: JANET T. PITTS

D

02/25/2009

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

\_\_\_\_\_  
Date