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Feb 21, 1999 8:00 am
Secretary of State

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**NONPROFIT
 CORPORATION
 ANNUAL REPORT
 1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # N98000000192

1. Corporation Name

HANGING VINE NEIGHBORHOOD, INC.

Principal Place of Business

6948 HANGING VINE WAY
TALLAHASSEE FL 32311

Mailing Address

6948 HANGING VINE WAY
TALLAHASSEE FL 32311

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

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30

3. Date Incorporated or Qualified

01/14/1998

4. FEI Number

EIN 59-3487039

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required6. Election Campaign Financing ☐\$5.00 May Be
Added to Fees

Trust Fund Contribution

9. Name and Address of Current Registered Agent

NEELY, JACK S
6948 HANGING VINE WAY
TALLAHASSEE FL 32311

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 617.0503, Florida Statutes.

SIGNATURE

Jack Neely

(NOTE: Registered Agent signature required when reinstating)

DATE

1/5/99

12. OFFICERS AND DIRECTORS

TITLE Secretary-Treasurer ☐ DELETE

NAME Claire Neely

STREET ADDRESS 6948 Hanging Vine Way

CITY-ST-ZIP Tallahassee, FL 32311

TITLE Registered Agent - Pres./Dir. ☐ DELETE

NAME Jack Neely

STREET ADDRESS 6948 Hanging Vine Way

CITY-ST-ZIP Tallahassee, FL 32311

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Secretary-Treasurer ☐ Change ☒ Addition

1.2 NAME Claire Neely

1.3 STREET ADDRESS 6948 Hanging Vine Way

1.4 CITY-ST-ZIP Tallahassee, FL 32311

2.1 TITLE Director ☐ Change ☒ Addition

2.2 NAME Michael Bateman

2.3 STREET ADDRESS 6937 Hanging Vine Way

2.4 CITY-ST-ZIP Tallahassee, FL 32311

3.1 TITLE Director ☐ Change ☒ Addition

3.2 NAME Richard Tedder

3.3 STREET ADDRESS 6939 Hanging Vine Way

3.4 CITY-ST-ZIP Tallahassee, FL 32311

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

SIGNATURE:

Katherine Harris **REQUIRED**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/5/99

850-878-6541

Date

Daytime Phone #

CR2E037 (11/98)