2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N98000003242

Apr 24, 2009 Secretary of State

Entity Name: VILLAGE AT HAWK'S CAY PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

800 DUCK KEY DRIVE MARATHON, FL 33050 US

Current Mailing Address: New Mailing Address:

800 DUCK KEY DRIVE MARATHON, FL 33050 US

FEI Number: 65-0799952 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KOBY, MICHELLE 800 DUCK KEY DRIVE MARATHON, FL 33050 US

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

MCGUIRE, CHARLES MCGUIRE, CHARLES Name: Name: 79 MASSACHUSETTS AVE Address: 79 MASSACHUSETTS AVE Address: City-St-Zip: MASSAPEQUA, NY 11758 US City-St-Zip: MASSAPEQUA, NY 11758 US

Title: () Delete Title: DS (X) Change () Addition HARDING, BONNIE Name: HARDING, BONNIE Name:

Address: 6761 S. GRAND DRIVE Address: 6761 S. GRAND DRIVE City-St-Zip: BOCA RATON, FL 33433 US City-St-Zip: BOCA RATON, FL 33433 US

Title: () Delete Title: DT (X) Change () Addition MILLS, JOHN F MILLS, JOHN F Name: Name:

Address: P.O. BOX 1463 Address: P.O. BOX 1463 City-St-Zip: EAGLE, CO 81631 US City-St-Zip: EAGLE, CO 81631 US

(X) Change () Addition Title: Title: () Delete

Name: THOMMES, JEFFREY Name: THOMMES, JEFFREY Address: 21 ARROW WOOD DRIVE Address: 21 ARROW WOOD DRIVE

City-St-Zip: HAWTHORN WOODS, IL 60047 US City-St-Zip: HAWTHORN WOODS, IL 60047 US

Title: () Delete Title: () Change () Addition

BIRMELE, EDWARD Name: Name: 1671 EDINBURGH COVE Address: Address: City-St-Zip: LONDON, OH 43140 US 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: CHARLES MCGUIRE DP 04/24/2009