


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2005 08:00 AM
Secretary of State

DOCUMENT # N99000001617

1. Entity Name
HAWTHORNE OAKS HOMEOWNER'S ASSOCIATION, INC.



Principal Place of Business 280 OAK RUN COURT APOPKA, FL 32703	Mailing Address 280 OAK RUN COURT APOPKA, FL 32703
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04102005 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-3717696	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MORSE, DAVID
280 OAK RUN COURT
APOPKA, FL 32703**

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when re-registering)

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

U00000303107
 04/13/05-80099-002 70.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD MORSE, DAVID 280 OAK RUN CT APOPKA, FL 32703
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T NEGRON, ZENAIDA P.O. BOX 2267 APOPKA, FL 32704
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DUDZINSKI, KRISTIN P.O. BOX 2267 APOPKA, FL 32704
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **DAVID MORSE** **4/11/2005** **407-889-4756**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day-C Phone #