

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002114

FILED
Apr 18, 2011
Secretary of State

Entity Name: HILLSIDE HOMEOWNERS ASSOCIATION OF CLAY COUNTY, INC.

Current Principal Place of Business:

1648 SEDGWICK DR
MIDDLEBURG, FL 32068 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 1107
MIDDLEBURG, FL 32050 US

New Mailing Address:

POST OFFICE BOX 1107
MIDDLEBURG, FL 320501107 US

FEI Number: 59-3574276

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BREHER, RODNEY D
1648 SEDGWICK DR
MIDDLEBURG, FL 32068 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
Name: BREHER, RODNEY D
Address: POB 1107
City-St-Zip: MIDDLEBURG, FL 320501107 US

Title: VPD
Name: COX, THELTON SR
Address: POB 1107
City-St-Zip: MIDDLEBURG, FL 320501107 US

Title: TD
Name: CORBETT, ELLIOTT S III
Address: POB 1107
City-St-Zip: MIDDLEBURG, FL 320501107 US

Title: SD
Name: COX, DEBORAH S
Address: POB 1107
City-St-Zip: MIDDLEBURG, FL 320501107 US

Title: D
Name: NESI, ALBERT JR
Address: POB 1107
City-St-Zip: MIDDLEBURG, FL 320501107 US

Title: D
Name: GIBBS, ALVIN D
Address: POB 1107
City-St-Zip: MIDDLEBURG, FL 320501107 US

I hereby 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 all other like empowered.

SIGNATURE: RODNEY D BREHER

P

04/18/2011

Electronic Signature of Signing Officer or Director

Date