

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000006908

**Entity Name:** HUDSON BAYOU NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

1308 POMELO AVE  
SARASOTA, FL 34239

**Current Mailing Address:**

1308 POMELO AVE  
SARASOTA, FL 34239 US

**FEI Number:** 20-2198002

**Certificate of Status Desired:** No

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

HABORAK, GEORGE J  
1308 POMELO AVE  
SARASOTA, FL 34239 US

*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:** GEORGE J HABORAK

02/23/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            MAY, BARBARA  
Address        1610 ARLINGTON STREET  
City-State-Zip: SARASOTA FL 34239

Title            VP, DIRECTOR  
Name            LANDIS, MICHAEL  
Address        1782 LOMA LINDA STREET  
City-State-Zip: SARASOTA FL 34239

Title            SECRETARY, DIRECTOR  
Name            LUZIER, TOM  
Address        1025 POMELO AVE  
City-State-Zip: SARASOTA FL 34236

Title            TREASURER, DIRECTOR  
Name            HABORAK, GEORGE  
Address        1308 POMELO AVE  
City-State-Zip: SARASOTA FL 34239

Title            DIRECTOR  
Name            MUMFORD, JENNIFER  
Address        1735 BAHIA VISTA STREET  
City-State-Zip: SARASOTA FL 34239

Title            DIRECTOR  
Name            CHAPMAN, SUSAN  
Address        1621 BAY POINTE CT.  
City-State-Zip: SARASOTA FL 34236

Title            DIRECTOR  
Name            DELUCA, MATT  
Address        1655 HYDE PARK ST.  
City-State-Zip: SARASOTA FL 34239

Title            DIRECTOR  
Name            HORTON, MARTHA  
Address        1729 LOMA LINDA ST.  
City-State-Zip: SARASOTA FL 34239

**Continues on page 2**

*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:** GEORGE HABORAK

**TREASURER**

02/23/2021

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           HENRY, JULIE  
Address        1700 BAHIA VISTA STREET  
City-State-Zip: SARASOTA FL 34239

Title           DIRECTOR  
Name           PATTEN, ROB  
Address        1701 HAWTHORNE ST.  
City-State-Zip: SARASOTA FL 34239