2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2018
Secretary of State
CC1735345811

DOCUMENT# N24295

Entity Name: HICKORY HILL COMMUNITY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

518 SPORTSMAN PARK DRIVE
SEFFNER, FL 33584

Current Mailing Address:

P. O. BOX 1022
SEFFNER, FL 33583 US

FEI Number: 59-2963455

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOYD, MARJORIE A
518 SPORTSMAN PARK DRIVE
SEFFNER, FL 33584 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: MARJORIE A BOYD 02/21/2018

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	SECRETARY
Name	BODDEN, CHERYL
Address	610 SPORTSMAN PARK DRIVE
City-State-Zip:	SEFFNER FL 33584

Title	DIRECTOR
Name	LAY, JON
Address	501 RUNNING HORSE ROAD
City-State-Zip:	SEFFNER FL 33584

Title	DIRECTOR
Name	SMITH, ROWENA
Address	632 PENN NATIONAL ROAD
City-State-Zip:	SEFFNER FL 33584

Title	VP
Name	MENDEZ, CHERYL
Address	405 LAUREL PARK PLACE
City-State-Zip:	SEFFNER FL 33584

Title	TREASURER
Name	MERRITT, PATRICIA (TRICIA)
Address	506 FINGER LAKES PLACE
City-State-Zip:	SEFFNER FL 33584

Title	DIRECTOR
Name	BELCHER, HERBERT (JAY)
Address	617 PENN NATIONAL ROAD
City-State-Zip:	SEFFNER FL 33584

Title	PRESIDENT
Name	BOYD, MARJORIE
Address	518 SPORTSMAN PARK DRIVE
City-State-Zip:	SEFFNER FL 33584

Title	DIRECTOR
Name	COOPER, LISA
Address	613 PENN NATIONAL ROAD
City-State-Zip:	SEFFNER FL 33584

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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: MARJORIE A BOYD PRESIDENT 02/21/2018

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	BOLEN, MICHAEL
Address	516 SPORTSMAN PARK DRIVE
City-State-Zip:	SEFFNER FL 33584