SUITE 202 FORT WALTO	NBEACH, FL 32549			
Current Mai	ling Address:			
P.O. BOX 26	620			
FORT WALT	ON BEACH, FL 32549 US			
FEI Number: 20-1931022			Certificate of Status Desired: No	
Name and A	Address of Current Registered Agent:			
MCLEOD, JON 25 WALTER M SUITE 202 FORT WALTON				
	d entity submits this statement for the purpose of changing its regis	stered office or regis		
	E JON MCLEOD	stered office or regis		8/12/2022
		stered office or regis		
	Electronic Signature of Registered Agent	stered office or regis		8/12/2022
SIGNATURE	Electronic Signature of Registered Agent	stered office or regis		8/12/2022
SIGNATURE Officer/Dire	Electronic Signature of Registered Agent		0	8/12/2022
SIGNATURE Officer/Dire	Electronic Signature of Registered Agent Ctor Detail : SECRETARY	Title	0 TREASURER, PRESIDENT	8/12/2022
SIGNATURE Officer/Dire Title Name	Electronic Signature of Registered Agent Ctor Detail : SECRETARY CAUDILL, ASHLEY P.O. BOX 2620	Title Name Address	0 TREASURER, PRESIDENT MUELLER, GLEN	8/12/2022 Date
SIGNATURE Officer/Dire Title Name Address	Electronic Signature of Registered Agent Ctor Detail : SECRETARY CAUDILL, ASHLEY P.O. BOX 2620	Title Name Address	0 TREASURER, PRESIDENT MUELLER, GLEN P.O. BOX 2620	8/12/2022 Date
SIGNATURE Officer/Dire Title Name Address City-State-Zip:	Electronic Signature of Registered Agent Ctor Detail : SECRETARY CAUDILL, ASHLEY P.O. BOX 2620 FORT WALTON BEACH FL 32549	Title Name Address	0 TREASURER, PRESIDENT MUELLER, GLEN P.O. BOX 2620	8/12/2022 Date
SIGNATURE Officer/Dire Title Name Address City-State-Zip: Title	Electronic Signature of Registered Agent Ctor Detail : SECRETARY CAUDILL, ASHLEY P.O. BOX 2620 FORT WALTON BEACH FL 32549 VP	Title Name Address	0 TREASURER, PRESIDENT MUELLER, GLEN P.O. BOX 2620	8/12/2022 Date
SIGNATURE Officer/Dire Title Name Address City-State-Zip: Title Name Address	Electronic Signature of Registered Agent Ctor Detail : SECRETARY CAUDILL, ASHLEY P.O. BOX 2620 FORT WALTON BEACH FL 32549 VP MOODY, JIM	Title Name Address	0 TREASURER, PRESIDENT MUELLER, GLEN P.O. BOX 2620	8/12/2022 Date

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: GLEN MUELLER

TREASURER

08/12/2022

Electronic Signature of Signing Officer/Director Detail

REPORT

Entity Name: HADLEIGH HILLS TOWNHOME OWNERS ASSOCIATION, INC.

2022 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL

Current Principal Place of Business:

25 WALTER MARTIN DR N.E. SUITE 202 FORT WALTON BEACH, FL 32549 FILED Aug 12, 2022 Secretary of State 7630597290CC

Date