| Entity Name                                                                                                                                            | : HADLEIGH HILLS TOWNHOME OWNERS A       | N, INC. | Secretary of State<br>0325543622CC |          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|---------|------------------------------------|----------|
| Current Principal Place of Business:                                                                                                                   |                                          |         |                                    |          |
| 25 WALTER MA<br>SUITE 202                                                                                                                              | RTIN DR N.E.                             |         |                                    |          |
|                                                                                                                                                        | BEACH, FL 32549                          |         |                                    |          |
| Current Mail                                                                                                                                           | ling Address:                            |         |                                    |          |
| P.O. BOX 26                                                                                                                                            | 20                                       |         |                                    |          |
| FORT WALT                                                                                                                                              | ON BEACH, FL 32549 US                    |         |                                    |          |
|                                                                                                                                                        |                                          |         |                                    |          |
| FEI Number: 20-1931022 Certificate of Status Desired: No                                                                                               |                                          |         |                                    |          |
| Name and Address of Current Registered Agent:                                                                                                          |                                          |         |                                    |          |
| PANHANDLE PROPERTY GROUP, INC<br>25 WALTER MARTIN DR N.E.<br>SUITE 202                                                                                 |                                          |         |                                    |          |
| FORT WALTON BEACH, FL 32549 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: JON MCLEOD 01/24/2023                                                                                                                       |                                          |         |                                    |          |
| SIGNATORE                                                                                                                                              |                                          |         |                                    | Date     |
|                                                                                                                                                        | Electronic Signature of Registered Agent |         |                                    | Dale     |
| Officer/Director Detail :                                                                                                                              |                                          |         |                                    |          |
| Title                                                                                                                                                  | SECRETARY                                | Title   | TREASURER, PF                      | RESIDENT |
| Name                                                                                                                                                   | CAUDILL, ASHLEY                          | Name    | MUELLER, GLEN                      | l        |
| Address                                                                                                                                                | P.O. BOX 2620                            | Address | P.O. BOX 2620                      |          |

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

PRESIDENT

City-State-Zip: FORT WALTON BEACH FL 32549

01/24/2023

FILED Jan 24, 2023

Electronic Signature of Signing Officer/Director Detail

## 2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011647

City-State-Zip: FORT WALTON BEACH FL 32549