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Mar 27 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N09817** (0)

1. Corporation Name

HUNTINGTON GROUP MASTER ASSOCIATION, INC.



Principal Place of Business C/O STEVEN MEZER, PA 1212 COURT STREET STE. B CLEARWATER FL 34616 US	Mailing Address C/O STEVEN MEZER, PA 1212 COURT STREET STE. B CLEARWATER FL 34616 US
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3. Date Incorporated or Qualified 06/18/1985	Applied For ☐ Not Applicable
4. FEI Number 59-2821699	

2. Principal Place of Business 21 C/O SEABOARD ARBORS Suite, Apt. #, etc. 22 1700 MCMULLEN BOOTH RD. City & State 23 CLEARWATER, FL Zip 24 33759	2a. Mailing Address 25 1700 MCMULLEN BOOTH RD. Suite, Apt. #, etc. 27 SUITE C-3 City & State 28 CLEARWATER, FL Zip 29 33759 Country 30 USA
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? ☒ Yes ☐ No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent MEZER, PA S 1212 COURT STREET SUITE B CLEARWATER FL 34616

10. Name and Address of New Registered Agent 81 Name LEIGHTON, LENNARD A. 82 Street Address (P.O. Box Number is Not Acceptable) 1700 MCMULLEN BOOTH RD. 83 SUITE C-3 84 City CLEARWATER FL 85 Zip Code 33759
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 617.0503, Florida Statutes.

SIGNATURE *[Signature]* (NOTE: Registered Agent signature required when reinstating) DATE **3/17/98**

12. OFFICERS AND DIRECTORS	
TITLE	PD ☒ DELETE
NAME	LIEBLING, ARTHUR
STREET ADDRESS	1025 CHILLUM CT.
CITY-ST-ZIP	SAFETY HARBOR FL 34695
TITLE	VPD ☒ DELETE
NAME	DOBSON, JOHN
STREET ADDRESS	1201 WELLINGTON WAY
CITY-ST-ZIP	SAFETY HARBOR FL 34695
TITLE	SD ☒ DELETE
NAME	WESTON, SANDY
STREET ADDRESS	100 CHATHAM COURT
CITY-ST-ZIP	SAFETY HARBOR FL 34695
TITLE	D ☒ DELETE
NAME	KAEIN, JAMES
STREET ADDRESS	1005 CATHAM CT.
CITY-ST-ZIP	SAFETY HARBOR FL 34695
TITLE	DT ☒ DELETE
NAME	DAMKOEHLER, BETH
STREET ADDRESS	1115 HUNTINGTON LANE
CITY-ST-ZIP	SAFETY HARBOR FL 34695
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	PD ☐ Change ☒ Addition
1.2 NAME	MASSELL, RICHARD
1.3 STREET ADDRESS	1217 HUNTINGTON LANE
1.4 CITY-ST-ZIP	SAFETY HARBOR FL
2.1 TITLE	VPD ☐ Change ☒ Addition
2.2 NAME	EPSTEIN, LISA
2.3 STREET ADDRESS	1024 WYNDHAM
2.4 CITY-ST-ZIP	SAFETY HARBOR FL
3.1 TITLE	SD ☐ Change ☒ Addition
3.2 NAME	DAMKOEHLER, SHAWN
3.3 STREET ADDRESS	1115 HUNTINGTON LANE
3.4 CITY-ST-ZIP	SAFETY HARBOR FL
4.1 TITLE	TD ☐ Change ☒ Addition
4.2 NAME	HAJKO, BILL
4.3 STREET ADDRESS	1110 CHESHIRE
4.4 CITY-ST-ZIP	SAFETY HARBOR FL
5.1 TITLE	D ☐ Change ☒ Addition
5.2 NAME	FIELD, DAVID
5.3 STREET ADDRESS	1215 HUNTINGTON LANE
5.4 CITY-ST-ZIP	SAFETY HARBOR FL
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* 3/17/98 88-736-4529

CF2E037 (10/97)