2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 06, 2002 8:00 am
Secretary of State
02-06-2002 90051 035 ****61.25

DOCUMENT # N09817

1. Entity Name

HUNTINGTON GROUP MASTER ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2189 CLEVELAND ST STE 225 CLEARWATER FL 33765	2189 CLEVELAND ST STE 225 CLEARWATER FL 33765 US

141366

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2821699 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LEIGHTON, LENNARD A 2189 CLEVELAND ST STE 225 CLEARWATER FL 33765	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD DYRCZ, STAN 1013 CHILLUM COURT SAFETY HARBOR FL 34695	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BORZELLIERE, RAY 1007 CHATHAM COURT SAFETY HARBOR, FL 34695	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD AMSPAUGH, DEETTE 916 KINGSCOTE COURT SAFETY HARBOR FL 34695	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DECANINI, KIM 1007 CHILLUM COURT SAFETY HARBOR FL 34695	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD EPSTEIN, LISA 1024 WYNDHAM WAY SAFETY HARBOR, FL 34695	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BRUNTON, JACK 913 KINGSCOTE COURT SAFETY HARBOR FL 34695	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD PIAZZA, MARK 1103 HUNTINGTON LANE SAFETY HARBOR, FL 34695	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD HAJKO, BARBARA 1110 CHESCHIRE COURT SAFETY HARBOR FL 34695	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Debbie L. Amspaugh REQUIRED 01-16-2002
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #