

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09817

FILED
Apr 13, 2007
Secretary of State

Entity Name: HUNTINGTON GROUP MASTER ASSOCIATION, INC.

Current Principal Place of Business:

1799-B N. BELCHER RD
CLEARWATER, FL 33765

New Principal Place of Business:

Current Mailing Address:

1799-B N. BELCHER RD
CLEARWATER, FL 33765 US

New Mailing Address:

FEI Number: 59-2821699 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

AMERI-TECH REALTY INC.
1799-B N. BELCHER RD
CLEARWATER, FL 33765 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GEISS, KIM
Address: 1215 HUNTINGTON LANE
City-St-Zip: SAFETY HARBOR, FL 34695

Title: PD () Delete
Name: INCORVIA, JOE
Address: 1105 HUNTINGTON LANE
City-St-Zip: SAFETY HARBOR, FL 34695

Title: DVP () Delete
Name: SCHWEITZER, DEANN
Address: 1029 CHILLUM CT
City-St-Zip: SAFETY HARBOR, FL 34695

Title: TD () Delete
Name: LAPHANZ, CHERYL
Address: 1113 WELLINGTON WAY
City-St-Zip: SAFETY HARBOR, FL 34695

Title: SD () Delete
Name: WILSON, KATHLEEN
Address: 1017 WYNHAM WAY
City-St-Zip: SAFETY HARBOR, FL 34695

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HINTON, CHUCK
Address: 111 CHATHAM COURT
City-St-Zip: SAFETY HARBOR, FL 34695

Title: SD (X) Change () Addition
Name: INCORVIA, JOE
Address: 1105 HUNTINGTON LANE
City-St-Zip: SAFETY HARBOR, FL 34695

Title: VPD (X) Change () Addition
Name: SARTHOU, TITO
Address: 1103 HUNTINGTON LANE
City-St-Zip: SAFETY HARBOR, FL 34695

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: WILSON, KATHLEEN
Address: 1017 WYNHAM WAY
City-St-Zip: SAFETY HARBOR, FL 34695

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: KATHLEEN WILSON

PD

04/13/2007

Electronic Signature of Signing Officer or Director

Date