2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR**

Mar 24, 2003 8:00 am Secretary of State **DOCUMENT # N09817** 1. Entity Name 03-24-2003 90230 047 ****61.25 HUNTINGTON GROUP MASTER ASSOCIATION, INC. Principal Place of Business Mailing Address 2169 CLEVELAND ST 2109-GLEVELAND-ST **GTE 223** 10045554 OTF OOF CLEARWATER FL 22765 CLEARWATER FL 22765 2. Principal Place of Business 3. Mailing Address <u> 1799-B N Belcher Rd</u> 799-B N Belcher Rd Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 59-2821699 Applied For Clearwater Not Applicable Clearwater Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired <u>33765</u> 33765 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent AMERI-TECH REALTY INC <u> LEIGHTON, LENNARD A.</u> Street Address (P.O. Box Number is Not Acceptable) 2189 CLEVELAND ST 1799-B N Belcher Rd STE-225 -CLEARWATER-FL City Zip Code J_{i} Clearwater 33765 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE ŧ , 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. SD TITLE ☑ Delete TITLE ☐ Change Addition AMSPAUGH, DEETTE NAME NAME Andrew Steingold STREET ADDRESS 916 KINGSCOTE COURT STREET ADDRESS 1113 Cheshire Court CITY-ST-ZIP SAFETY HARBOR FL 34695 CITY-ST-ZIP Safety Harbor, FL 34695 SD TITLE ☐ Delete TITLE Change NAME PIAZZA, MARK NAME Steven Fishman STREET ADDRESS 1103 HUNTINGTON LANE STREET ADDRESS 1009 Wyndham Way CITY-ST-ZIP SAFETY HARBOR FL 34695 CITY-ST-ZIP Safety Harbor, FL 34695 TITLE Delete TITLE ☐ Change ☐ Addition EPSTEIN, LISA NAME NAME STREET ADDRESS 1024 WYNDHAM WAY STREET ADDRESS CITY-ST-ZIP SAFETY HARBOR FL 34695 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition BORZELLIERE, RAY NAME NAME STREET ADDRESS 1007 CHATHAM COURT STREET ADDRESS CITY-ST-7IP SAFETY HARBOR FL 34695 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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

SIGNATURE:

727-726-8000

FILED