

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 24, 1999 8:00 am  
Secretary of State

03-24-1999 90046 005 \*\*\*\*61.25

DOCUMENT # N34806

1. Corporation Name

HUNTER GREEN HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

7101 W COMMERCIAL BLVD  
4-A  
FT. LAUDERDALE FL 33319  
US

Mailing Address

P. O. BOX 26478  
FT. LAUDERDALE FL 33320-6478  
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

30 Country

3. Date Incorporated or Qualified

10/20/1989

4. FEI Number

65-0156286

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

ALLIANCE PROPERTY SYSTEMS  
7101 W COMMERCIAL BLVD  
4A  
FT LAUDERDALE FL 33319

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DV ☒ DELETE  
NAME KRUG, DANIEL  
STREET ADDRESS 146 COLLY WAY  
CITY-ST-ZIP NO LAUDERDALE FL

TITLE D ☐ DELETE  
NAME REMBERAB, LALLY, RAMPERSAD  
STREET ADDRESS 132 COLLY WAY  
CITY-ST-ZIP N LAUDERDALE FL

TITLE PD ☐ DELETE  
NAME SIGNORETTI, MASSIMO  
STREET ADDRESS 159 COLLY WAY  
CITY-ST-ZIP N LAUDERDALE FL

TITLE D ☒ DELETE  
NAME NELSON, FOICE  
STREET ADDRESS 605 LAUREL WAY  
CITY-ST-ZIP NORTH LAUDERDALE FL

TITLE DVP ☐ DELETE  
NAME SREBOT, CHARLES  
STREET ADDRESS 136 COLLY WAY  
CITY-ST-ZIP NORTH LAUDERDALE FL

TITLE DTS ☐ DELETE  
NAME HUTH, LINDA  
STREET ADDRESS 142 COLLY WAY  
CITY-ST-ZIP NORTH LAUDERDALE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☐ Change ☒ Addition  
1.2 NAME ENA D EDWARDS  
1.3 STREET ADDRESS 221 MADDY LANE  
1.4 CITY-ST-ZIP NORTH LAUDERDALE FL 33068

2.1 TITLE D ☐ Change ☒ Addition  
2.2 NAME GLENN HUTH  
2.3 STREET ADDRESS 142 COLLY WAY  
2.4 CITY-ST-ZIP NORTH LAUDERDALE FL 33068

3.1 TITLE D ☐ Change ☒ Addition  
3.2 NAME PATRICIA SIGNORETTA  
3.3 STREET ADDRESS 159 COLLY WAY  
3.4 CITY-ST-ZIP NORTH LAUDERDALE FL 33068

4.1 TITLE DVP Janet ☐ Change ☒ Addition  
4.2 NAME CHARLES R SREBOT  
4.3 STREET ADDRESS 136 COLLY WAY  
4.4 CITY-ST-ZIP NORTH LAUDERDALE, FL 33068

5.1 TITLE D ☐ Change ☒ Addition  
5.2 NAME LEO BROCKLEBANK  
5.3 STREET ADDRESS 300 BISHOP ROAD  
5.4 CITY-ST-ZIP NORTH LAUDERDALE FL 33068

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, with all other like empowered.

SIGNATURE

Signature of Massimo Signoretti  
3/20/99 954-970-789

CR2E037 (11/98)