


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 26, 2007 8:00 am
Secretary of State

04-26-2007 90185 008 ****61.25

DOCUMENT # N93000004431				
1. Entity Name HUNTER GLEN HOMEOWNER'S ASSOCIATION, INC.				
Principal Place of Business 10034 W. MCNAB RD TAMARAC, FL 33021 US		Mailing Address 10034 W. MCNAB RD TAMARAC, FL 33321 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		
City & State		City & State		
Zip	Country	Zip	Country	4. FEI Number 65-0440045
				Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent ROBERT KAYE & ASSOC. 6261 NW 6TH WAY S# 103 FORT LAUDERDALE, FL 33309			7. Name and Address of New Registered Agent	
			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. I am familiar with, and accept the obligations of registered agent.				
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____				
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees
Make check payable to Florida Department of State				
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	DP <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	EDWARDS, BRENDA	NAME	Director Hensch, Allen	
STREET ADDRESS	1031 W. JASMINE LANE	STREET ADDRESS	1329 E. Glen Oak Rd.	
CITY-ST-ZIP	TAMARAC, FL 33321	CITY-ST-ZIP	North Lauderdale FL 33008	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	KAVE, GRADY	NAME	D Finich, Lawrence	
STREET ADDRESS	10034 W. MCNAB RD	STREET ADDRESS	1308 W. Glen Oak Rd.	
CITY-ST-ZIP	TAMARAC, FL 33321	CITY-ST-ZIP	North Lauderdale FL 33008	
TITLE	DVP <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	GAYLE, MAXWELL	NAME	D Tamburo, J	
STREET ADDRESS	1017 W. JASMINE LANE	STREET ADDRESS	1316 E. Glen Oak Rd.	
CITY-ST-ZIP	TAMARAC, FL 33321	CITY-ST-ZIP	North Lauderdale FL 33068	
TITLE	DS <input checked="" type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	GAYLE, TINA	NAME	President GAYLE MAXWELL	
STREET ADDRESS	1017 W. JASMINE LANE	STREET ADDRESS	1017 W. Jasmine Lane	
CITY-ST-ZIP	TAMARAC, FL 33321	CITY-ST-ZIP	N. Lauderdale FL 33068	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HOLMES, MARY	NAME	Director Edwards, Brenda	
STREET ADDRESS	10034 W MCNABB ROAD	STREET ADDRESS	1031 W. Jasmine Lane	
CITY-ST-ZIP	TAMARAC, FL 33321	CITY-ST-ZIP	N. Lauderdale FL 33068	
TITLE	TD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	NIGEL, ALFRED	NAME		
STREET ADDRESS	10034 W. MCNAB RD	STREET ADDRESS		
CITY-ST-ZIP	TAMARAC, FL 33321	CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Maxwell Gayle</u>		SIGNATURE: <u>Maxwell Gayle</u>		Date: <u>4/20/07</u>
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Daytime Phone #: <u>954-344-5353</u>

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04112007 Chg-NP CR2E037 (12/06)