

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Oct 19, 2009
Secretary of State**

DOCUMENT# N97000006753

Entity Name: HUNTINGTON LAKES THREE CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**2220 JAND C BLVD
SUITE 1
NAPLES, FL 34109**New Principal Place of Business:****Current Mailing Address:**2220 J AND C BLVD
SUITE 1
NAPLES, FL 34109**New Mailing Address:**2220 JAND C BLVD
SUITE 1
NAPLES, FL 34109

FEI Number: 65-0815601

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:C & L MANAGEMENT SERVICES
2220 J AND C BLVD
SUITE 1
NAPLES, FL 34109 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: VP () Delete
Name: PRESLEY, GREG
Address: 6270 HUNTINGTON LAKES CIRCLE #202
City-St-Zip: NAPLES, FL 34119Title: P () Delete
Name: FUGGI, DON
Address: 2555 ASPEN CREEK LANE #101
City-St-Zip: NAPLES, FL 34119Title: T () Delete
Name: SWIFT, RICHARD
Address: 6260 HUNTINGTON LAKES CIRCLE #104
City-St-Zip: NAPLES, FL 34119Title: S () Delete
Name: BRUSCA, CLAYTON
Address: 6610 HUNTINGTON LAKES CIRCLE #203
City-St-Zip: NAPLES, FL 34119Title: D () Delete
Name: JOHNSON, FLETCHER
Address: 6260 HUNTINGTON LAKES CIRCLE #203
City-St-Zip: NAPLES, FL 34119**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: D (X) Change () Addition
Name: LUKE, THOMAS
Address: 6270 HUNTINGTON LAKES CIRCLE #201
City-St-Zip: NAPLES, FL 34119Title: S/T (X) Change () Addition
Name: BRUSCA, CLAYTON
Address: 6610 HUNTINGTON LAKES CIRCLE #203
City-St-Zip: NAPLES, FL 34119Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT TITUS

MGR

10/19/2009

Electronic Signature of Signing Officer or Director_____
Date