2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001154

FILED Apr 04, 2012 Secretary of State

Entity Name: HUNTINGTON LAKES FOUR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

6558 HUNTINGTON LAKES CIRCLE C/O ABILITY MANAGEMENT, INC NAPLES, FL 34119

6736 LONE OAK BLVD NAPLES, FL 34109

Current Mailing Address: New Mailing Address:

C/O ABILITY MANAGEMENT, INC 6736 LONE OAK BLVD NAPLES, FL 34109

FEI Number: 59-3562212 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LIVLEY, DENNIS F ABILITY MANAGEMENT, INC C/O ABILITY MANAGEMENT, INC 6736 LONE OAK BLVD 6736 LONE OAK BLVD NAPLES, FL 34109 NAPLES, FL 34109 US

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: DENNIS F LIVELY 04/04/2012

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

COHEN, EDWIN Name:

Address: 2670 CREEK LANE, #102 City-St-Zip: NAPLES, FL 34119

Title:

Name: BLOOM, LUCILLE Address: 2665 CREEK LANE, #102 City-St-Zip: NAPLES, FL 34119

Title:

HEIL, JAMES Name:

2660 CREEK LANE, #202 Address: City-St-Zip: NAPLES, FL 34119

Title:

Name: FAHRLENDER, GLORIA Address: 2655 CREEK LANE, #202 City-St-Zip: NAPLES, FL 34119

Title:

GEDDES, RON Name:

2650 CREEK LANE, #202 Address: NAPLES, FL 34119 City-St-Zip:

I hereby 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 all other like empowered.

SIGNATURE: DENNIS F LIVELY RA 04/04/2012