

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 1:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N44096 (8)

1. Corporation Name

HUNTER RUN HOMEOWNERS' ASSOCIATION OF BROWARD CO
UNTY, INC.

Principal Place of Business

913 E. MAPLE STREET
N. LAUDERDALE FL 33068

Mailing Address

913 E. MAPLE STREET
N. LAUDERDALE FL 33068

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/26/1991

3a. Date of Last Report

03/18/1994

4. FEI Number

65-0293416

Applied For

Not Applicable

2. Principal Place of Business

21 P.O. Box 934930

2a. Mailing Address

26 P.O. Box 934930

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Margate FL

City & State

28 Margate FL

Zip

Country

24 33093

25 USA

Zip

Country

29 33093

30 USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

FRIEL, WILLIAM F. III
913 E. MAPLE STREET
N. LAUDERDALE FL 33068

10. Name and Address of New Registered Agent

81 Name

Lorenzo Wood (President)

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

730 HOLLY Street

83

84 City

N. Lauderdale

FL

85 Zip Code

33068

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Lorenzo C. Wood

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
DP	FRIEL, WILLIAM F. III	913 E. MAPLE STREET	N. LAUDERDALE FL
DT	COATS, JESSE F.	913 E. MAPLE STREET	N. LAUDERDALE FL
DS	JAFFEE, CHARLES L.	913 E. MAPLE STREET	N. LAUDERDALE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP
DP	Lorenzo Wood	730 Holly St,	N. Lauderdale FL 33068
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP
DV	Steve Rodriguez	815 E Palm Run Dr,	N. Laud. FL 33068
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP
DT	Richard Chase	830 E Palm Run Dr,	N. Laud FL 33068
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP
DS	Katherine Manzella	828 E Palm Run Dr,	N. Laud FL 33068
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP
D	Marver Nurse Denny	811 E Palm Run Dr,	N. laud FL 33068
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP
D	Kevin Malone	903 Buttonwood N. Laud	FL 33068

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Lorenzo C. Wood

Daytime Telephone