2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11743

Entity Name: DUNLAWTON HILLS HOMEOWNERS ASSOCIATION, INC.

FILED Mar 05, 2013 **Secretary of State** CC2227075307

Current Principal Place of Business:

829 STONYBROOK CIRCLE PORT ORANGE, FL 32127

Current Mailing Address:

829 STONYBROOK CIRCLE PORT ORANGE. FL 32127 US

FEI Number: 59-2594089 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PORT ORANGE FL 32127

CLIFTON, SHERRY K 1326 S RIDGEWOOD AVE #14 DAYTONA BEACH, FL 32114 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title Title VΡ

BELL, CARL GIL Name Name BRUBAKER, JOHN

823 LONG MEADOW CT 873 STONYBROOK CIRCLE Address Address City-State-Zip: PORT ORANGE FL 32127

Title D Title Т

Name SARDINA, GERRY Name MCKNIGHT, ROBERT

Address 917 STONYBROOK CIRCLE Address 926 STONYBROOK CIR PORT ORANGE FL 32127 City-State-Zip: PORT ORANGE FL 32127 City-State-Zip:

Title Title S

Name MCCORMICK, DARLENE Name **GUNTHER. JOAN** Address 921 STONYBROOK CIR 924 STONYBROOK CIRCLE Address City-State-Zip: PORT ORANGE FL 32127

City-State-Zip: PORT ORANGE FL 32127

Title

HOTALING, JUNE Name

980 STONYBROOK CIRCLE Address PORT ORANGE FL 32127 City-State-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.

03/05/2013 SIGNATURE: DARLENE MCCORMICK **PRES**