

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000004431

**Entity Name:** HUNTER GLEN HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O ELEGANT HOMES PROPERTY MANAGEMENT LLC  
999 S ROCK ISLAND ROAD  
NORTH LAUDERDALE, FL 33068

**Current Mailing Address:**

999 S ROCK ISLAND ROAD  
NORTH LAUDERDALE , FL 33068 US

**FEI Number:** 65-0440045

**Certificate of Status Desired:** No

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

ELEGANT HOMES PROPERTY MANAGEMENT LLC  
999 S ROCK ISLAND ROAD  
NORTH LAUDERDALE, FL 33068 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:** COURTNEY DIXON

04/30/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            LAWRENCE, HUIN  
Address        999 S ROCK ISLAND ROAD  
City-State-Zip: NORTH LAUDERDALE FL 33068

Title            TREASURER  
Name            HOLMES-SMITH, MARY  
Address        999 S ROCK ISLAND ROAD  
City-State-Zip: NORTH LAUDERDALE FL 33068

Title            SECRETARY  
Name            FERNANDEZ, ANNETTE  
Address        999 S ROCK ISLAND ROAD  
City-State-Zip: NORTH LAUDERDALE FL 33068

Title            VP  
Name            WATSON, ELIZBETH  
Address        999 S ROCK ISLAND ROAD  
City-State-Zip: NORTH LAUDERDALE FL 33068

Title            DIRECTOR  
Name            SMITH, BRIAN  
Address        999 S ROCK ISLAND ROAD  
City-State-Zip: NORTH LAUDERDALE FL 33068

Title            DIRECTOR  
Name            JAMES, RAMONA  
Address        999 S ROCK ISLAND ROAD  
City-State-Zip: NORTH LAUDERDALE FL 33068

*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:** HUIN LAWRENCE

PRESIDENT

04/30/2024

Electronic Signature of Signing Officer/Director Detail

Date