

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000381

Entity Name: HUNTINGTON LAKES TWO CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

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

Current Mailing Address:

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

FEI Number: 65-0746144

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ABILITY MANAGEMENT, INC
6736 LONE OAK BLVD
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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name MOSER, LONA
Address 6550 HUNTINGTON LAKES CIRCLE,
#203
City-State-Zip: NAPLES FL 34119

Title T/S
Name SOWA, BARBARA
Address 2421 MILL CREEK LANE, #204
City-State-Zip: NAPLES FL 34119

Title VP
Name SCALISE, FRANK
Address 2520 ASPEN CREEK LANE, #201
City-State-Zip: NAPLES FL 34119

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: LONA MOSER

PRESIDENT

04/03/2013

Electronic Signature of Signing Officer/Director Detail

Date