

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743172

FILED
Apr 08, 2005
Secretary of State

Entity Name: PROPERTY OWNER'S ASSOCIATION OF HUNTINGTON, INC.

Current Principal Place of Business:

1981 SE 52ND CT
OCALA, FL 34471 US

New Principal Place of Business:

5420 SE 18TH LANE
OCALA, FL 34471 US

Current Mailing Address:

1981 SE 52ND CT
OCALA, FL 34471 US

New Mailing Address:

5420 SE 18TH LANE
OCALA, FL 34471 US

FEI Number: 59-0370570

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ATTARD, ALICE
1981 SE 52ND CT
OCALA, FL 34471 US

Name and Address of New Registered Agent:

BETTY, LETHA D
5420 SE 18TH LANE
OCALA, FL 34471 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: LETHA D. BETTY

04/08/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NOVKOV, TIM
Address: 5441 SE 18 LN
City-St-Zip: OCALA, FL 34471

Title: ST () Delete
Name: ATTARD, ALICE
Address: 1981 SE 52ND CT
City-St-Zip: OCALA, FL 34471

Title: D () Delete
Name: POUCHER, BETH
Address: 5100 SE 17TH STREET
City-St-Zip: OCALA, FL 34471

Title: D () Delete
Name: TODD, DONALD
Address: 5440 S.E. 21ST LANE
City-St-Zip: OCALA, FL 34471

Title: D () Delete
Name: CATALANOTTO, ANITA
Address: 1851 S.E. 54TH TERRACE
City-St-Zip: OCALA, FL 34471

Title: V () Delete
Name: COBINE, MIKE
Address: 5141 SE 18TH ST
City-St-Zip: OCALA, FL 34471

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: COBINE, MIKE
Address: 5141 SE 18TH STREET
City-St-Zip: OCALA, FL 34471

Title: ST (X) Change () Addition
Name: BETTY, LETHA D
Address: 5420 SE 18TH LANE
City-St-Zip: OCALA, FL 34471

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: REGISTER, HUEY
Address: 1950 SE 54TH TERRACE
City-St-Zip: OCALA, FL 34471

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: BUSH, MATT
Address: 1920 SE 51ST TERRACE
City-St-Zip: OCALA, FL 34471

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LETHA D. BETTY

ST

04/08/2005

Electronic Signature of Signing Officer or Director

Date