## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 24, 2008 8:00 am Secretary of State

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DOCUMENT # 758767  1. Entity Name THE GLENS AT HUNTERS RUN CONDOMINIUM ASSOCIATIONINC.							-	012 ****6	
3700 CLUBHOUSE LANE 33		Mailing Address 3700 CLUBHOUSE LANE BOYNTON BCH., FL 334				<b></b>		11871 B1312 B1871 B181	IM <b>Q</b> ( 81 (88)
Principal Place of Business - No P.O. Box #     3.		3. Mailing Address				4			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04032008	Chg-NP	CR2E	037 (12/06)	
City & State		City & State			4. FEI Numbe 59-219		•	<del></del>	ptied For
Zip	Country	Zip	Country		5. Certificate	of Status Desired	d 🗆	\$8.75 Add	fitional
	6. Name and Address of Current	Registered Agent			7. Name and	Address of Nev	v Registered	l Agent	-
LEVINE, JAY STEVEN			Name					- Agum	-
2500 N MII STE 275	LITARY TRAIL		Street Address		P.O. Box Numbe	r is Not Accepta	able)		_
BOCA RAT	TON, FL 33431		City					1 - 3: 5: 7	
			City				F	L Zip Code	0
8. The above the obligation	named entity submits this statement folions of registered agent.	or the purpose of changing its re	egistered office o	or register	ed agent, or bot	h, in the State of	Florida. I an	n familiar with,	and accept
SIGNATURE.	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: F	Registered Agent signs	ture required	when reinstating)		DATE		
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: F		ture required		e		ck payable to	······································
	Filing Fee Is \$61.25 Due by May 1, 2008	9. Election Camp Trust Fund Co	paign Financing ntribution.		\$5.00 May Bo	F	Make che lorida Depa	ck payable to	tate
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10. TITLE NAME STREET ADDRESS CITY-ST-ZIP FILE	Filing Fee Is \$61.25 Due by May 1, 2008  OFFICERS AND DID  SD  LEVIN, ELSA E  37000 CLUBHOUSE LN.  BOYTON BEACH, FL 33436  PD	9. Election Camp Trust Fund Co	aign Financing ntribution.  11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	SD LEV 370 BO	\$5.00 May BE Added to Fees ADDITIONS/CHA	LSA E 3 HOUS BEACH	Make che lorida Depa CERS AND D	Change	10 Addition
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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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; fild that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR