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Jan 28 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 761908 (3)
1. Corporation Name
HUNTERS CROSSING HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

344 REMINGTON RUN LOOP
TALLAHASSEE FL 32312
US

344 REMINGTON RUN LOOP
TALLAHASSEE FL 32312-1402
US

3. Date Incorporated or Qualified
02/10/1982

3a. Date of Last Report
01/25/1996

2. Principal Place of Business

2a. Mailing Address

21 3204 Remington Run

26 3204 Remington Run

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Tallahassee, FL

27 Tallahassee, FL

City & State

City & State

23

28

Zip

Country

24 32312

25 Leon

29 32312

30 Leon

4. FEI Number
59-2156808

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MOORE, W. TAYLOR
111-21 S. MAGNOLIA DR.
TALLAHASSEE FL 32301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VD ☐ DELETE
NAME CARTER, ROBERT E.
STREET ADDRESS 344 REMINGTON RUN LOOP
CITY - ST - ZIP TALLAHASSEE FL

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE PD ☒ DELETE
NAME TROELSTRUP, JO
STREET ADDRESS 331 REMINGTON RUN LOOP
CITY - ST - ZIP TALLAHASSEE FL

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME Pat Hogan, VD
2.3 STREET ADDRESS 3318 Remington Run
2.4 CITY - ST - ZIP Tallahassee, FL 32312

TITLE VD PD ☐ DELETE
NAME HENDERSON, DONALD C
STREET ADDRESS 353 HUNTERS CROSSING
CITY - ST - ZIP TALLAHASSEE FL
President
HCH

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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; and that my name appears in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE: Donald C Henderson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-18-97

Date

Daytime Phone # 0000410

CR2E037 (9/96)