

2000 UNIFORM BUSINESS REPORT (UBR)

Amended

090800

DOCUMENT # 761908

1. Entity Name

HUNTERS CROSSING HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2. Principal Place of Business

375 ROB ROY TRAIL

3. Mailing Address

375 ROB ROY TRAIL

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

TALLAHASSEE, FL

City & State

TALLAHASSEE, FL

4. FEI Number

59-2156808

Applied For

Not Applicable

Zip

32312

Country

USA

Zip

32312

Country

USA

5. Certificate of Status Desired ☐ ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MOORE, W. TAYLOR
P.O. BOX 507
239 E. VIRGINIA STREET
TALLAHASSEE, FL 32302-0507

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE P/D ☒ Delete
NAME MORGAN, CONNIE
STREET ADDRESS 3322 REMINGTON RUN
CITY-ST-ZIP TALLAHASSEE, FL 32312

TITLE V/D ☒ Delete
NAME YON, DAVID
STREET ADDRESS 356 COLT COURT
CITY-ST-ZIP TALLAHASSEE, FL 32312

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P/S ☐ Change ☒ Addition
NAME KOONS, JACK
STREET ADDRESS 372 ROB ROY TRAIL
CITY-ST-ZIP TALLAHASSEE, FL 32312

TITLE V/S ☐ Change ☒ Addition
NAME DEMETREE, GEORGE
STREET ADDRESS 370 ROB ROY TRAIL
CITY-ST-ZIP TALLAHASSEE, FL 32312

TITLE V/S ☐ Change ☒ Addition
NAME GRESSON, VIRGINIA
STREET ADDRESS 374 ROB ROY TRAIL
CITY-ST-ZIP TALLAHASSEE, FL 32312

TITLE D ☒ Change ☐ Addition
NAME CARTER, ROBERT E.
STREET ADDRESS 344 REMINGTON RUN LOOP
CITY-ST-ZIP TALLAHASSEE, FL 32312

TITLE S/T ☐ Change ☒ Addition
NAME HOBBS, MIMI
STREET ADDRESS 375 ROB ROY TRAIL
CITY-ST-ZIP TALLAHASSEE, FL 32312

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I 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 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; and 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

Jack C. Koons

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-7-00

Date

385-4889

Daytime Phone #

SP

CR 10:17 (MKT)