

# 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000002027

FILED  
Sep 18, 2006  
Secretary of State

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

**Current Principal Place of Business:**

7346 BEAUMONT DRIVE  
LAKELAND, FL 33810

**New Principal Place of Business:**

2525 PINE VALLEY DR  
LAKELAND, FL 33810

**Current Mailing Address:**

P.O. BOX 1202  
KATHLEEN, FL 33849

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

SMECEK, NICOLE  
2529 PINE VALLEY DRIVE  
LAKELAND, FL 33810 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: NICOLE SMECEK

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: JOHNSON, WILLIE  
Address: 7346 BEAUMONT DRIVE  
City-St-Zip: LAKELAND, FL 33810

Title: VPD ( ) Delete  
Name: EVANS, MIKE  
Address: 2525 PINE VALLEY DRIVE  
City-St-Zip: LAKELAND, FL 33810

Title: S ( ) Delete  
Name: FORSTER, KEITH  
Address: 7489 PLEASANT HILL DRIVE  
City-St-Zip: LAKELAND, FL 33810

Title: T ( ) Delete  
Name: EVANS, HEIDI  
Address: 2525 PINE VALLEY DRIVE  
City-St-Zip: LAKELAND, FL 33810

Title: D ( ) Delete  
Name: HEIN, RANDY  
Address: 2533 PINE VALLEY DRIVE  
City-St-Zip: LAKELAND, FL 33810

Title: D ( ) Delete  
Name: SMITH, CHUCK  
Address: 2530 PINE VALLEY DRIVE  
City-St-Zip: LAKELAND, FL 33810

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: S (X) Change ( ) Addition  
Name: MCFADDEN, ALBERT  
Address: 7355 BEAUMONT  
City-St-Zip: LAKELAND, FL 33810

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: HEIDI EVANS

T

09/18/2006

Electronic Signature of Signing Officer or Director

Date