2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002027

FILED Apr 14, 2009 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business: 2525 PINE VALLEY DR LAKELAND, FL 33810 **Current Mailing Address: New Mailing Address:** P.O. BOX 1202 KATHLEEN, FL 33849 FEI Number: 59-3709011 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ALLEN, ERIC ALLEN & BAILEY P.A. US LAKELAND, FL 33803 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition RILEY, BRYAN HALE, ROB Name: Name: 7423 BEAUMONT DRIVE Address: 2631 PINE VALLEY DRIVE Address: City-St-Zip: LAKELAND, FL 33810 City-St-Zip: LAKELAND, FL 33810 Title: VPD () Delete Title: (X) Change () Addition HEISLER, MICHAEL Name: CLECKNER, KAREN Name: Address: 7406 BEAUMONT DRIVE Address: 2623 PINE VALLEY DRIVE City-St-Zip: LAKELAND, FL 33810 City-St-Zip: LAKELAND, FL 33810 Title: () Delete Title: (X) Change () Addition MIDEA, KIM DORER, SANDY Name: Name: 7399 PINE VALLEY DR Address: Address: 2521 PINE VALLEY DR City-St-Zip: LAKELAND, FL 33810 City-St-Zip: LAKELAND, FL 33810 Title: () Delete Title: (X) Change () Addition Name: SCRIVER, DONNA Name: HARMS, HAROLD 7423 BEAUMONT DRIVE Address: Address: 7418 BEAUMONT DRIVE City-St-Zip: LAKELAND, FL 33810 City-St-Zip: LAKELAND, FL 33810 Title: () Delete Title: () Change () Addition EVANS, HEIDI Name: Name: 2525 PINE VALLEY DR Address: Address: City-St-Zip: LAKELAND, FL 33810 City-St-Zip: Title: () Delete Title: () Change (X) Addition JERRY, GALLIHER Name: Name: Address: Address: 7427 BEAUMONT DR LAKELAND, FL 33810 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 04/14/2009