

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2006 8:00 am
Secretary of State

05-05-2006 90177 005 ****61.25

DOCUMENT # N01000003955

1. Entity Name
**HUNTINGTON II OF LEGENDS CONDOMINIUM
ASSOCIATION, INC.**



Principal Place of Business
**12734 KENWOOD LANE, SUITE 49
FORT MYERS, FL 33907**

Mailing Address
**12734 KENWOOD LANE, SUITE 49
FORT MYERS, FL 33907**

40086346



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02072006 Chg-NP CR2E037 (11/05)

4. FEI Number
65-1125395

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**SHIELDS, CHRISTOPHER J
12734 KENWOOD LANE, SUITE 49
FORT MYERS, FL 33907**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☒ Delete
NAME WILLARD, ED
STREET ADDRESS 14621 SHERBROOK PL, #106
CITY-ST-ZIP FORT MYERS, FL 33912

TITLE DVP ☒ Delete
NAME HUGUENOT, SAUNDRA
STREET ADDRESS 14621 SHERBROOK PL, #104
CITY-ST-ZIP FORT MYERS, FL 33912

TITLE STD ☐ Delete
NAME ECKOUT, CAROLE
STREET ADDRESS 14621 SHERBROOK PL, # 103
CITY-ST-ZIP FORT MYERS, FL 33912

TITLE ASM ☐ Delete
NAME ROEDDING, DON
STREET ADDRESS 12734 KENWOOD LANE
CITY-ST-ZIP FORT MYERS, FL 33907

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 ☐ Change ☒ Addition
NAME CHARLES HUGUENOT
STREET ADDRESS 14621 SHERBROOK PL, #104
CITY-ST-ZIP FORT MYERS, FL 33912

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

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

TITLE ☐ Change ☐ Addition
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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 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; 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:

Charles Huguenot
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #