

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001218

FILED
Apr 29, 2005
Secretary of State

Entity Name: HUCKLEBERRY PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

POST OFFICE BOX 5290
WINTER PARK, FL 32793

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 5290
WINTER PARK, FL 32793

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

INTERSTATE HOLDINGS, INC.
431 E. HERATIO AVENUE
SUITE 110
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: ASNANI, BHAGWAN
Address: POST OFFICE BOX 5290
City-St-Zip: WINTER PARK, FL 32793

Title: D () Delete
Name: HARTOG, RONALD
Address: 709 E. COLONIAL DRIVE
City-St-Zip: ORLANDO, FL 32803

Title: D () Delete
Name: HARPER, STEPHEN
Address: 721 SR 535
City-St-Zip: WINTER GARDENS, FL 34777

Title: TD () Delete
Name: DIMARCO, ATTILIO
Address: 2164 DEER HOLLOW CIRCLE
City-St-Zip: LONGWOOD, FL 32779

Title: V () Delete
Name: HARTOG, DONALD
Address: POST OFFICE BOX 5290
City-St-Zip: WINTER PARK, FL 32793

Title: S () Delete
Name: HARPER, LISA
Address: POST OFFICE BOX 5290
City-St-Zip: WINTER PARK, FL 32793

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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 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: BHAGWAN ASNANI

P

04/29/2005

Electronic Signature of Signing Officer or Director

Date