2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2006
Secretary of State

DOCUMENT# N03000005803

Entity Name: HUNTERDON HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1883 NW 114TH LOOP
OCALA, FL 34475

New Principal Place of Business:

PO BOX 772935
OCALA, FL 34477

Current Mailing Address:

1883 NW 114TH LOOP
OCALA, FL 34475

New Mailing Address:

PO BOX 772935
OCALA, FL 34477

FEI Number: 20-0603861 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORTON, SETH RA
1883 NW 114TH LOOP
OCALA, FL 34475 US

Name and Address of New Registered Agent:

MORTON, SETH RA
PO BOX 772935
OCALA, FL 34477 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: SETH MORTON 04/12/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MORTON, SETH
Address: 1883 NW 114TH LOOP
City-St-Zip: OCALA, FL 34475

Title: TD ( ) Delete
Name: MARINO, MIKE
Address: 1883 NW 114TH LOOP
City-St-Zip: OCALA, FL 34475

Title: D ( ) Delete
Name: MARTIN, TRAC
Address: 1883 NW 114TH LOOP
City-St-Zip: OCALA, FL 34475

Title: D (X) Delete
Name: JOHNSON, JEFF
Address: 1883 NW 114TH LOOP
City-St-Zip: OCALA, FL 34475

Title: D (X) Delete
Name: POCCIA, RAY
Address: 1883 NW 114TH LOOP
City-St-Zip: OCALA, FL 34475

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MORTON, SETH PD
Address: PO BOX 772935
City-St-Zip: OCALA, FL 34477

Title: TD (X) Change ( ) Addition
Name: MARINO, MIKE TD
Address: PO BOX 772935
City-St-Zip: OCALA, FL 34477

Title: SD (X) Change ( ) Addition
Name: PASSARO, BETTY SD
Address: PO BOX 772935
City-St-Zip: OCALA, FL 34477

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: SETH MORTON RA 04/12/2006
Electronic Signature of Signing Officer or Director Date