

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 07, 2008
Secretary of State

DOCUMENT# N03000010480

Entity Name: HUNTERS RIDGE PROPERTY OWNER'S ASSOCIATION, INC.**Current Principal Place of Business:**285 NW 138TH TERR., STE. 100
JONESTOWN, FL 32669**New Principal Place of Business:****Current Mailing Address:**8173 HUNTER'S RIDGE SOUTH
GLEN ST. MARY, FL 32040**New Mailing Address:****FEI Number:** 20-0785666**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CURTIS, RYAN C
285 NW 138TH TERR., STE. 100
JONESTOWN, FL 32669 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: PEDGEON, LES
Address: 14251 HUNTER'S RIDGE ROAD EAST
City-St-Zip: GLEN ST. MARY, FL 32040**Title:** VPD () Delete
Name: PARDEN, MICHAEL
Address: 14342 HUNTER'S RIDGE EAST
City-St-Zip: GLEN ST. MARY, FL 32040**Title:** ST () Delete
Name: PAULUS, ANGELA
Address: 8173 HUNTER'S RIDGE SOUTH
City-St-Zip: GLEN ST. MARY, FL 32040**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PD (X) Change () Addition
Name: CASTLE, CLINT
Address: 14267 HUNTER'S RIDGE ROAD WEST
City-St-Zip: GLEN ST. MARY, FL 32040**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** ST (X) Change () Addition
Name: KNIGHT, HOLLY
Address: 14397 HUNTER'S RIDGE WEST
City-St-Zip: GLEN ST. MARY, FL 32040

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: MICHAEL PARDEN

VPD

07/07/2008

Electronic Signature of Signing Officer or Director

Date