

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03793

FILED
Mar 10, 2009
Secretary of State

Entity Name: HUNTERS RUN I HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

553 S. DUNCAN AVE
CLEARWATER, FL 33756 US

New Principal Place of Business:

Current Mailing Address:

553 S. DUNCAN AVE
CLEARWATER, FL 33756 US

New Mailing Address:

FEI Number: 59-2489449

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JULIA GALPIN REALTY INC
553 S. DUNCAN AVE
CLEARWATER, FL 33756 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: P () Delete
Name: DI AMICO, JOSEPH
Address: 3426 HUNTERS RUN LN
City-St-Zip: TAMPA, FL 33614

Title: S () Delete
Name: DICKSON, RALPH
Address: 7905 LUXBURY PLACE
City-St-Zip: TAMPA, FL 33614

Title: T () Delete
Name: HALL, RONALD
Address: 3422 HUNTERS RUN LN
City-St-Zip: TAMPA, FL 33614

Title: V () Delete
Name: HICKS, LEE
Address: 3428 HUNTERS RUN LN
City-St-Zip: TAMPA, FL 33614

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change () Addition
Name: HALL, RONALD
Address: 3422 HUNTERS RUN LN
City-St-Zip: TAMPA, FL 33614

Title: T (X) Change () Addition
Name: KMIECIK, DAVID
Address: 3406 HUNTERS RUN
City-St-Zip: TAMPA, FL 33614

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: JOSEPH DI AMICO

P

03/10/2009

Electronic Signature of Signing Officer or Director

Date