

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010273

FILED  
Mar 01, 2007  
Secretary of State

**Entity Name:** HUNTER CREEK ESTATES HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

9696 BONITA BEACH ROAD #210  
BONITA SPRINGS, FL 34135

**New Principal Place of Business:**

9696 BONITA BEACH ROAD #203  
BONITA SPRINGS, FL 34135

**Current Mailing Address:**

9696 BONITA BEACH ROAD #210  
BONITA SPRINGS, FL 34135

**New Mailing Address:**

9696 BONITA BEACH ROAD # 203  
BONITA SPRINGS, FL 34135

**FEI Number:** 90-0267730

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MALTESE, BEN J  
9696 BONITA BEACH ROAD #210  
BONITA SPRINGS, FL 34135 US

**Name and Address of New Registered Agent:**

MALTESE, BEN J  
9696 BONITA BEACH ROAD #203  
BONITA SPRINGS, FL 34135 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: \_\_\_\_\_

03/01/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MALTESE, BEN J  
Address: 9696 BONITA BEACH ROAD #210  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VD ( ) Delete  
Name: SAAB, KHALIL  
Address: 3407 TORREY ROAD  
City-St-Zip: FLINT, MI 48503

Title: STD ( ) Delete  
Name: MANSOR, GERALD G  
Address: 5405 GATEWAY CENTRE #D  
City-St-Zip: FLINT, MI 48507

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: MALTESE, BEN J  
Address: 9696 BONITA BEACH ROAD #203  
City-St-Zip: BONITA SPRINGS, FL 34135

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: JESSICA SEMIKEN

MS.

03/01/2007

Electronic Signature of Signing Officer or Director

Date