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**Mar 24 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Bandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N05470 (2)

1. Corporation Name
HUNTER'S RUN HOMEOWNERS ASSOCIATION IN FOX RUN, INC.

Principal Place of Business 10041 FOX RUN RD PENSACOLA FL 32514 US	Mailing Address 10041 FOX RUN RD PENSACOLA FL 32514 US
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3. Date Incorporated or Qualified
10/04/1984

4. FEI Number 59-2456280	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
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2. Principal Place of Business 21 10045 Fox Run Rd. Suite, Apt. #, etc. 22 City & State 23 Pensacola, FL Zip 24 32514 Country 25 USA	2a. Mailing Address 26 10045 Fox Run Rd Suite, Apt. #, etc. 27 City & State 28 Pensacola, FL Zip 29 32514 Country 30 USA
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.
 Yes No

9. Name and Address of Current Registered Agent

~~DAVIS, G. FRED~~
~~10041 FOX RUN ROAD~~
~~PENSACOLA FL 32514~~

10. Name and Address of New Registered Agent

81 Name Robert J. Clancey
82 Street Address (P.O. Box Number is Not Acceptable) 10045 Fox Run Rd.
83
84 City Pensacola FL 85 Zip Code 32514

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE **Robert J. Clancey Vice Pres./Treasurer** *Robert J. Clancey* **03-17-98**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE PD	NAME DAVIS, FRED	<input checked="" type="checkbox"/> DELETE
STREET ADDRESS 10045 FOX RUN RD.	CITY-ST-ZIP PENSACOLA FL	
TITLE VTD	NAME CLANCEY, ROBERT J	<input type="checkbox"/> DELETE
STREET ADDRESS 10045 FOX RUN RD.	CITY-ST-ZIP PENSACOLA FL	
TITLE STD	NAME MCGEE, STEVE	<input checked="" type="checkbox"/> DELETE
STREET ADDRESS 10025 FOX RUN ROAD	CITY-ST-ZIP PENSACOLA FL	
TITLE	NAME	<input type="checkbox"/> DELETE
STREET ADDRESS	CITY-ST-ZIP	
TITLE	NAME	<input type="checkbox"/> DELETE
STREET ADDRESS	CITY-ST-ZIP	
TITLE	NAME	<input type="checkbox"/> DELETE
STREET ADDRESS	CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME MCGEE, STEVE	
1.3 STREET ADDRESS 10025 FOX RUN RD	
1.4 CITY-ST-ZIP Pensacola, FL 32514	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME BUCKLEY CLIFF	
3.3 STREET ADDRESS 10023 FOX RUN RD	
3.4 CITY-ST-ZIP Pensacola, FL 32514	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Robert J. Clancey* **03-17-98 (850) 477-9875**

CR2E037 (10/97)