

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 15, 2009
Secretary of State**

DOCUMENT# N08554

Entity Name: HUCKLEBERRY FIELDS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1360 N. GOLDENROD RD.
#12
ORLANDO, FL 32807 US

New Principal Place of Business:

Current Mailing Address:

1360 N. GOLDENROD RD.
#12
ORLANDO, FL 32807 US

New Mailing Address:

FEI Number: 59-2643070 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIEBZAK, KEITH R
C/O KL MGMT. GROUP, INC.
1360 N. GOLDENROD RD. #12
ORLANDO, FL 32807 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: REDFORD, SUSAN
Address: 1360 N. GOLDENROD RD. #12
City-St-Zip: ORLANDO, FL 32807

Title: TD () Delete
Name: MELDRUM-GREEN, DAVID
Address: 1360 N. GOLDEN ROD RD 12
City-St-Zip: ORLANDO, FL 32807

Title: VD () Delete
Name: SLIDER, MONICA
Address: 1360 N. GOLDENROD RD 12
City-St-Zip: ORLANDO, FL 32807

Title: SD () Delete
Name: KLEM, DANI
Address: 1360 N. GOLDENROD RD 12
City-St-Zip: ORLANDO, FL 32807

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: SD (X) Change () Addition
Name: KLEM, DONI
Address: 1360 N. GOLDENROD RD 12
City-St-Zip: ORLANDO, FL 32807

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: KEITH R. KIEBZAK

RA

04/15/2009

Electronic Signature of Signing Officer or Director

Date