

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09147

FILED  
Apr 25, 2011  
Secretary of State

**Entity Name:** HUNT RIDGE AT TALL PINES, INC.

**Current Principal Place of Business:**

7902 US HWY. 19 N.  
PORT RICHEY, FL 34668 US

**New Principal Place of Business:**

9851 STATE ROAD 54  
NEW PORT RICHEY, FL 34655 US

**Current Mailing Address:**

7902 US HWY. 19 N.  
PORT RICHEY, FL 34668 US

**New Mailing Address:**

9851 STATE ROAD 54  
NEW PORT RICHEY, FL 34655 US

**FEI Number:** 59-2722577

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TAMPA BAY PROPERTY MANAGEMENT, INC.  
7902 US HWY. 19 N.  
PORT RICHEY, FL 34668 US

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

PARKLANE REAL ESTATE SERVICES  
9851 STATE ROAD 54  
NEW PORT RICHEY, FL 34655 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: DORA STEED

04/25/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: T/SE  
Name: GAVIN, SUSAN  
Address: 7330 BALTUSROL DRIVE  
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: VP  
Name: KROBATSCH, ROBERT  
Address: 10847 BROOKHAVEN DRIVE  
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: PRES  
Name: CASSIDY, LLOYD  
Address: 10904 BROOKHAVEN DR  
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: DIR  
Name: COTUGNO, TONY  
Address: 10312 RAVINES DRIVE  
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: DIR  
Name: GUILIANO, SAM  
Address: 7233 BALTUSROL DRIVE  
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: D  
Name: COCHRAN-MCCARTHY, JENNEAN  
Address: 10312 PINENEEDLES  
City-St-Zip: NEW PORT RICHEY, FL 34654

I hereby 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 all other like empowered.

SIGNATURE: DORA STEED

MGR

04/25/2011

Electronic Signature of Signing Officer or Director

Date