## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N21920

FILED Apr 06, 2009 Secretary of State

Entity Name: HUNTERS GLEN COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

5211 NW 53RD STREET 5126 NW 50TH LANE

GAINESVILLE, FL 32653 US GAINESVILLE, FL 32653 US

Current Mailing Address: New Mailing Address:

5211 NW 53RD STREET 5126 NW 50TH LANE

GAINESVILLE, FL 32653 US GAINESVILLE, FL 32653 US

FEI Number: 59-3888365 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

TODD, JULIE A TARGETE, REGINA 5211 NW 53RD STREET 5126 NW 50TH LANE

GAINESVILLE, FL 32653 US GAINESVILLE, FL 32653 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: REGINA TARGETE 04/06/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P ( ) Delete Title: P (X) Change( ) Addition

 Name:
 MORRIS, JON
 Name:
 FERL, ROB

 Address:
 5206 NW 50TH LANE
 Address:
 5017 NW 53RD STREET

 City-St-Zip:
 GAINESVILLE, FL 32653 US
 City-St-Zip:
 GAINESVILLE, FL 32653 US

Title: T () Delete Title: T (X) Change () Addition

 Name:
 TODD, JULIE A
 Name:
 TARGETE, REGINA

 Address:
 5211 NW 53RD STREET
 Address:
 5126 NW 50TH LANE

 City-St-Zip:
 GAINESVILLE, FL 32653 US
 City-St-Zip:
 GAINESVILLE, FL 32653 US

Title: S () Delete Title: S (X) Change () Addition Name: ROSS, NANCY Name: CONROY, CHERYL

Address: 5209 NW 50TH LANE Address: 5119 NW 50TH LANE
City-St-Zip: GAINESVILLE, FL 32653 US City-St-Zip: GAINESVILLE, FL 32653 US

Title: S (X) Delete Title: ( ) Change ( ) Addition

 Name:
 KIRKPATRICK, PEGGY
 Name:

 Address:
 5203 NW 49TH LANE
 Address:

 City-St-Zip:
 GAINESVILLE, FL 32653 US
 City-St-Zip:

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: REGINA TARGETE T 04/06/2009