

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008 8:00 am
Secretary of State

04-14-2008 90058 043 ****61.25

DOCUMENT # N26528

1. Entity Name
HUNTERS RIDGE COMMUNITY ASSOCIATION, INC.



Principal Place of Business
**12500 HUNTERS RIDGE DR
BONITA SPRINGS, FL 34135 US**

Mailing Address
**12500 HUNTERS RIDGE DR
BONITA SPRINGS, FL 34135 US**

40068482



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03202008 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
65-0050825

Applied For
☐ Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**POGUE, EARL
12500 HUNTERS RIDGE DRIVE
BONITA SPRINGS, FL 34135**

Name **Padgett, Thomas R.**

Street Address (P.O. Box Number is Not Acceptable)
12607 Fox Ridge Dr. #4203

City **Bonita Springs FL** Zip Code **34135**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **R. Thomas Padgett**

3/28/08

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to:
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **DVP** ☐ Delete
NAME **PADGETT, THOMAS R**
STREET ADDRESS **12625 FOX RIDGE DR #1202**
CITY-ST-ZIP **BONITA SPRINGS, FL 34135**

TITLE **DP** ☒ Change ☐ Addition
NAME **Padgett, Thomas R.**
STREET ADDRESS **12607 Fox Ridge Dr. #4203**
CITY-ST-ZIP **Bonita Springs, FL 34135**

TITLE **DP** ☒ Delete
NAME **POGUE, EARL**
STREET ADDRESS **12655 HUNTERS LAKES CT**
CITY-ST-ZIP **BONITA SPRINGS, FL 34135**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **DS** ☒ Delete
NAME **FOSTER, DAVID**
STREET ADDRESS **12721 MAIDEN CANE LN**
CITY-ST-ZIP **BONITA SPRINGS, FL 34135**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **DT** ☐ Delete
NAME **KING, HAROLD**
STREET ADDRESS **12613 GLEN HOLLOW DR**
CITY-ST-ZIP **BONITA SPRINGS, FL 34135**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **DVP** ☐ Delete
NAME **MORGAN, SANDRAS**
STREET ADDRESS **12577 GLEN HOLLOW DR**
CITY-ST-ZIP **BONITA SPRINGS, FL 34135**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **DS** ☐ Change ☒ Addition
NAME **Miller, David**
STREET ADDRESS **12683 Buttonbush Place**
CITY-ST-ZIP **Bonita Springs, FL 34135**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **R. Thomas Padgett**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-28-2008

Date

Daytime Phone #