

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28527

FILED
Mar 20, 2006
Secretary of State

Entity Name: HUNTER'S GREEN PARCEL 7 NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

9035 QUAIL CREEK DRIVE
TAMPA, FL 33647

New Principal Place of Business:

Current Mailing Address:

9035 QUAIL CREEK DRIVE
TAMPA, FL 33647 US

New Mailing Address:

FEI Number: 59-2954332

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRITTON, TERI
9035 QUAIL CREEK DRIVE
TAMPA, FL 33647 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: VP () Delete
Name: GIRALDO, ANDREW
Address: 9079 QUAIL CREEK DR
City-St-Zip: TAMPA, FL 33647

Title: T () Delete
Name: PACE, GREG
Address: 9063 QUAIL CREEK
City-St-Zip: TAMPA, FL 33647

Title: S () Delete
Name: CINTRON, MARY ANN
Address: 9030 QUAIL CREEK DR
City-St-Zip: TAMPA, FL 33647

Title: P () Delete
Name: BRITTON, TERI
Address: 9035 QUAIL CREEK DR
City-St-Zip: TAMPA, FL 33647

Title: D () Delete
Name: MURRAY, DAVID
Address: 9084 QUAIL CREEK DR
City-St-Zip: TAMPA, FL 33647

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID MURRAY

D

03/20/2006

Electronic Signature of Signing Officer or Director

Date