

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32824

FILED
Apr 29, 2011
Secretary of State

Entity Name: HUNTER'S RIDGE HOMEOWNERS ASSOCIATION OF EAST FLORIDA, INC.

Current Principal Place of Business:

100 SHADOW CROSSINGS BLVD
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

POST OFFICE 353261
PALM COAST, FL 32135

New Mailing Address:

FEI Number: 59-2957052

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOUTHERN STATES MANAGEMENT GROUP, INC.
7 FLORIDA PARK DRIVE NORTH
SUITE C
PALM COAST, FL 32137 US

Name and Address of New Registered Agent:

SOUTHERN STATES MANAGEMENT GROUP, INC.
2 CAMINO DEL MAR
PALM COAST, FL 32137 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: FRED ANNON, JR

04/29/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DS
Name: MERRILL, SAMUEL
Address: POST OFFICE BOX 353261
City-St-Zip: PALM COAST, FL 32135

Title: PD
Name: SWANSKI, PAUL
Address: POST OFFICE BOX 353261
City-St-Zip: PALM COAST, FL 32135

Title: VTD
Name: STOGNER, WILLIAM L
Address: POST OFFICE BOX 353261
City-St-Zip: PALM COAST, FL 32135

Title: D
Name: PERKINSON, RICHARD
Address: POST OFFICE BOX 353261
City-St-Zip: PALM COAST, FL 32135

Title: D
Name: BOOKER, KIM
Address: POST OFFICE BOX 353261
City-St-Zip: PALM COAST, FL 32135

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: PAUL SWANSKI

PD

04/29/2011

Electronic Signature of Signing Officer or Director

Date