2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33640

FILED Mar 19, 2010 Secretary of State

Entity Name: HUNTINGTON COMMUNITY ASSOCIATION, INC.

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

CORNERSTONE PROPERTY SOLUTIONS OF NCF INC. 500 NW 43RD ST

500 NW 43RD ST STE C 3
GAINESVILLE, FL 32606 US GAINESVILLE, FL 32607 US

Current Mailing Address: New Mailing Address:

CORNERSTONE PROPERTY SOLUTIONS OF NCF INC. 500 NW 43RD STREET

500 NW 43RD ST STE C 3
GAINESVILLE, FL 32606 US GAINESVILLE, FL 32607 US

FEI Number: 59-2969043 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:

CORNERSTONE PROP SOLUTIONS OF N CEN FL CORNERSTONE PROPERTY SOLUTIONS

500 NW 43RD ST. STE C 500 NW 43RD STREET GAINESVILLE, FL 32606 US 3

GAINESVILLE, FL 32607 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: EUGENE C. HAUFLER 03/19/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D

 Name:
 DELANEY, DAVID

 Address:
 4315 NW 55TH WAY

 City-St-Zip:
 GAINESVILLE, FL 32606

Title: D

 Name:
 DENGLOW, NANCY

 Address:
 5622 NW 48TH PLACE

 City-St-Zip:
 GAINESVILLE, FL 32606

Title: F

 Name:
 FOSSUM, MARY

 Address:
 4529 NW 53RD ST

 City-St-Zip:
 GAINESVILLE, FL 32606

Title: VP

 Name:
 ARCHER, JIM

 Address:
 5706 NW 43RD ROAD

 City-St-Zip:
 GAINESVILLE, FL 32606

Title:

 Name:
 KREMER, BONITA

 Address:
 4805 NW 53RD ST

 City-St-Zip:
 GAINESVILLE, FL 32606

Title:

 Name:
 MCCARTY, MAC

 Address:
 4321 NW 51ST DRIVE

 City-St-Zip:
 GAINESVILLE, FL 32606

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: MARY FOSSUM P 03/19/2010