


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 18, 2004 8:00 am
Secretary of State

08-18-2004 90008 019 ****61.25

DOCUMENT # N36145

1. Entity Name
HUNTERS LAKE ASSOCIATION, INCORPORATED



Principal Place of Business
**P.O. BOX 3325
 SPRINGHILL, FL 34611-3325**

Mailing Address
**P.O. BOX 3325
 SPRING HILL, FL 34606
 34611-3325**



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

Zip Country

34611-3325

06022004 Chg-NP CR2E037 (10/03)

4. FEI Number
59-2987099

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**DERESPIRIS, DOUG
 274 RUSK CIRCLE
 SPRING HILL, FL 34806**

7. Name and Address of New Registered Agent

Name
Conner, Michael D.

Street Address (P.O. Box Number is Not Acceptable)
6250 Cranbrook Court

City
Spring Hill

City
FL Zip Code
34606

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 *Michael D. Conner* (NOTE: Registered Agent signature required when re-registering)

DATE *8/16/2004*

Filing Fee is **\$61.25**
 Due by **September 8, 2004**

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 NAME STREET ADDRESS CITY-ST-ZIP	VD FREY, G. D. 1110 TYLER ROAD SPRING HILL, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1110 Tyler Avenue
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DERESPIRIS, DOUG 274 RUSK CIRCLE SPRING HILL, FL 34806 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Pres & Dir Conner, Michael D. 6250 Cranbrook Court Spring Hill, FL 34606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARPER, ART 1172 TYLER AVE. SPRING HILL, FL 34806 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DERESPIRIS, RUBIN 274 RUSK CIRCLE SPRING HILL, FL 34806 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Sec & Dir Conner, Thelma T. 6250 Cranbrook Court Spring Hill, FL 34606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CARPER, MAUREEN 1172 TYLER AVE SPRING HILL, FL 34806 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Treas & Dir
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition VP & Dir Griswold, Mark 5587 Cactus Circle Spring Hill, FL 34606

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 *Michael D. Conner* President *8/16/2004*
 Michael D. Conner