03011999-90151-028-$61.25-$61.25

FILED
Mar 01, 1999 8:00 am
Secretary of State
03-01-1999 90151 028 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

370322 - 90319 - 47

DOCUMENT # N37850

1. *Corporation Name*
HUNTER'S GREEN HOMEOWNERS ASSOCIATION OF LA CITA , INC.

Principal Place of Business	Mailing Address
P. O. BOX 1101 TITUSVILLE FL 32781	P. O. BOX 1101 TITUSVILLE FL 32781

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip / Country 24 / 25	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip / Country 29 / 30	3. Date Incorporated or Qualified 04/23/1990 4. FEI Number 59-3002128 ☐ Applied For ☐ Not Applicable 5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
PAHMEIER, LAUREN 3630 MIRIAM DRIVE TITUSVILLE FL 32796	81 Name 82 Street Address (P.O. Box Number Is Not Acceptable) 83 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☒ DELETE	1.1 TITLE	President	☒ Change ☐ Addition
NAME	FISHER, DENISE		1.2 NAME	Fanny Mason	
STREET ADDRESS	776 FLORENCIA CIRCLE		1.3 STREET ADDRESS	782 Florencia Circle	
CITY-ST-ZIP	TITUSVILLE FL 32780		1.4 CITY-ST-ZIP	Titusville FL 32780	
TITLE	STD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	PAHMEIER, LAUREN		2.2 NAME		
STREET ADDRESS	3630 MIRIAM DR.		2.3 STREET ADDRESS		
CITY-ST-ZIP	TITUSVILLE FL 32796		2.4 CITY-ST-ZIP		
TITLE	VPD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	BUZZARD, STEVE		3.2 NAME		
STREET ADDRESS	P.O. BOX 2393 N/A		3.3 STREET ADDRESS		
CITY-ST-ZIP	TITUSVILLE FL 32781		3.4 CITY-ST-ZIP		
TITLE	PD - Title	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	Fanny MASON		4.2 NAME		
STREET ADDRESS	782 Florencia Circle		4.3 STREET ADDRESS		
CITY-ST-ZIP	Titusville FL 32780		4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (11/98)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Lauren Pahmeier Secty 1/8/99. 407-269-5000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #