

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38204

FILED
Apr 08, 2005
Secretary of State

Entity Name: HUNTER'S GREEN PARCEL 6 NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

PO BOX 46263
TAMPA, FL 33647 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 46263
TAMPA, FL 33647 US

New Mailing Address:

FEI Number: 59-3020095

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, BARBARA
17708 GREY EAGLE RD
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: TD () Delete
Name: JOHNSON, BARBARA
Address: 17708 GREY EAGLE RD
City-St-Zip: TAMPA, FL 33647

Title: D () Delete
Name: O'CONNEL, IRENE
Address: 17712 SHANNON OAKS
City-St-Zip: TAMPA, FL 33647

Title: SD () Delete
Name: PALANI, PAM
Address: 17718 GREY EAGLE RD
City-St-Zip: TAMPA, FL 33647

Title: VD () Delete
Name: WICKERSHAM, MIKE
Address: 17703 GREY EAGLE RD
City-St-Zip: TAMPA, FL 33647

Title: PD () Delete
Name: CULUMBER, JANENE
Address: 17720 GREY EAGLE
City-St-Zip: TAMPA, FL 33647

Title: PD () Delete
Name: NIELSEN, PHIL
Address: 17713 SHANNON OAKS CT
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: PD (X) Change () Addition
Name: NAKKA, KRISHNA M
Address: 17707 GREY EAGLE RD
City-St-Zip: TAMPA, FL 33647

Title: VD (X) Change () Addition
Name: CULUMBER, JANENE
Address: 17720 GREY EAGLE
City-St-Zip: TAMPA, FL 33647

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 Section 119.07(3)(i), 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: KRISHNA NAKKA

PD

04/08/2005

Electronic Signature of Signing Officer or Director

Date