

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90430 002 ****61.25

DOCUMENT # N39906

1. Entity Name
HONEYTREE PLACE HOMEOWNERS ASSOCIATION,
INC.



Principal Place of Business
1100 LOWRY AVE.
#42
LAKELAND, FL 33801 US

Mailing Address
1100 LOWRY AVE.
#42
LAKELAND, FL 33801 US

40080399



05012006 Chg-NP CR2E037 (4/06)

4. FEI Number
59-3036444

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

DUNAWAY, SUE D
1100 LOWRY AVE.
#42
LAKELAND, FL 33801

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2006

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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
DT	SUE D DUNAWAY	1100 LOWRY AVE., #42	LAKELAND, FL	<input type="checkbox"/>
DP	CORBETT, JEROME	1100 LOWRY AVE #65	LAKELAND, FL 33801	<input type="checkbox"/>
DV	DAVIS, CHRISTINA	1100 LOWRY AVE #67	LAKELAND, FL 33801	<input type="checkbox"/>
D	CLOUD, KATHY	1100 LOWRY AVE., #31	LAKELAND, FL 33801	<input checked="" type="checkbox"/>
D	Karin Alvarez	1100 Lowry Ave #25	Lakeland, FL 33801	<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
D	John Keen	1100 Lowry Ave #25	Lakeland, FL 33801	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	Mike Matlick	1100 Lowry Ave #52	Lakeland, FL 33801	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	Gene Griffin	1100 Lowry Ave #39	Lakeland, FL 33801	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	Dolores Jones	1100 Lowry Ave #13	Lakeland, FL 33801	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	Kevin Alvarez	1100 Lowry Ave #25	Lakeland, FL 33801	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Sue D. Dunaway Sue D. Dunaway 4-30-06 (863)646-1373
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #