**FILE NOW: FILING FEE AFTER MAY 1 IS $155.00**

CORPORATION
ANNUAL REPORT
**1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
Division of Corporations

APPROVED AND FILED

[illegible] -1 PM 12:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N41290 (0)

1. Corporate Name

HUCKLEBERRY FIELDS TRACTS N-9 & N-10, UNIT TWO, NEIGHBORHOOD ASSOCIATION, INC.

Principal Place of Business
2180 W SR 434 #5000
LONGWOOD FL 32779

Mailing Address
2180 W SR 434 #5000
LONGWOOD FL 32779

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/17/1990
3a. Date of Last Report: 03/15/1994
4. FEI Number: 59-3053822 — Applied For / Not Applicable

2. Principal Place of Business — 21
2a. Mailing Address — 26
City, State, Apt. # or Ste. — 22
City, State, Apt. # or Ste. — 27
City, State — 23
City, State — 28
City — 24 — County — 25
City — 29 — County — 30

5. Certificate of Status Desired [ ] — $8.75 Additional Fee Required
6. Certified Copy (Not Available for Profit Corporations) [ ] — $5.00 May Be Added to Fees
7. Nonprofit with IRS Section 501(c)(3) Tax Exempt Status [ ] — $68.75 Supplemental Fee Not Required
8. Does corporation have assets for charitable purposes under § 501(c)(3) Internal Revenue Code? [ ] Yes [X] No

9. Name and Address of Current Registered Agent

~~HART, JAMES W JR~~
~~SENTRY MANAGEMENT, INC.~~
2180 WEST S.R. 434, SUITE 5000
LONGWOOD FL 32779

10. Name and Address of New Registered Agent

81 Name: Pierre J Gauthier
82 Street Address (P.O. Box Number is Not Acceptable): Admiral Management Inc
83: 2180 West SR 434 Suite 5000
84 City: Longwood FL 85 Zip Code: 32779

11. Pursuant to the provisions of Section 607.0501(3) of the 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 business entity is authorized by its articles of incorporation or bylaws to do so. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of my position as registered agent.

SIGNATURE: Pierre Gauthier

| 12. OFFICERS AND DIRECTORS | 13. | |
|---|---|---|
| ~~P~~ | PD | [X] Change [ ] Addition |
| ~~NESSERALLA, FRED~~ | SCHUSTER, ALAN | |
| ~~12911 RIVER MEADOWS CT~~ | 604 WIDOW BARTLEY DR | |
| ~~ORLANDO FL~~ | ORLANDO FL | |
| ~~V~~ | TD | [X] Change [ ] Addition |
| ~~ROBERSON, DON~~ | AKERS, CHRISTOPHER | |
| ~~12904 LOWER RIVER BLVD~~ | 608 WIDOW BARTLEY DR | |
| ~~ORLANDO FL~~ | ORLANDO FL | |
| ~~S~~ | VD | [X] Change [ ] Addition |
| ~~KNAPPK, TOM~~ | CASWELL, MARYELLEN | |
| ~~623 UNCLE JACK CT~~ | 606 SHERBURN CT | |
| ~~ORLANDO FL~~ | ORLANDO FL | |
| ~~D~~ | SD | [X] Change [ ] Addition |
| ~~MARSHALL, BARBARA~~ | NAVAILLE, NANCY | |
| ~~509 SHERBURN CT~~ | 537 SHERBURN CT | |
| ~~ORLANDO FL~~ | ORLANDO FL | |
| ~~V~~ | D | [X] Change [ ] Addition |
| ~~DESAMPER, ROSEMARY~~ | LICHTY, CAROLYN | |
| ~~12800 BEN ROGERS CT~~ | 617 SHERBURN CT | |
| ~~ORLANDO FL~~ | ORLANDO FL | |
| | | [ ] Change [ ] Addition |

14. I hereby certify that the information supplied with this report is correct, that dues have not been paid, for the corporation listed in Section 607.0501 of the Florida Statutes. I further certify that if a profit corporation, the annual report or supplemental report reflects no change in officers or directors, and that no amendment to the articles of incorporation has been filed with respect to the corporation, I agree to file Form 1120 Florida Corporate Income Tax Return with the Department of Revenue within one year of the date of this report.

SIGNATURE: [signature] 7/21/96 8-26-2011
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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