## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N95000004040

FILED Jun 26, 2009 Secretary of State

Entity Name: HUNTINGTON ESTATES COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 914 WYNGATE COURT 907 WYNGATE COURT SAFETY HARBOR, FL 34695 SAFETY HARBOR, FL 34695 US US **Current Mailing Address: New Mailing Address:** 907 WYNGATE COURT 914 WYNGATE COURT SAFETY HARBOR, FL 34695 US SAFETY HARBOR, FL 34695 US FEI Number: 59-3467481 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: AMRUSO, RICHARD KWOK, JASON 907 WÝNGATE COURT 912 WYNGATE COURT US SAFETY HARBOR, FL 34695 SAFETY HARBOR, FL 34695 US 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: JASON KWOK 06/26/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete REINIGER, DAN VALAZQUEZ, SERGIO Name: Name: 914 WYNGATE CT Address: 923 WYNGATE CT Address: City-St-Zip: SAFETY HARBOR, FL 34695 City-St-Zip: SAFETY HARBOR, FL 34695 Title: () Delete Title: () Change () Addition VRENDENBURGH, LINDA Name: Name: Address: 903 WYNGATE CT Address: City-St-Zip: SAFETY HARBOR, FL 34695 City-St-Zip: Title: () Delete Title: () Change () Addition KWOK, JASON Name: Name: 907 WYNGATE CT Address: Address: City-St-Zip: SAFETY HARBOR, FL 34695 City-St-Zip: Title: () Delete Title: () Change () Addition Name: JAROSZ, CAROL Name: Address: 917 WYNGATE CT Address: City-St-Zip: SAFETY HARBOR, FL 34695 City-St-Zip: Title: ( ) Delete Title: ( ) Change (X) Addition LLEWELLYN, JACK Name: Name: 919 WYNGATE CT Address: Address: City-St-Zip: City-St-Zip: SAFETY HARBOR, FL 34695

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: JASON KWOK T 06/26/2009