

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006429

FILED  
Apr 15, 2007  
Secretary of State

Entity Name: HUNTER RIDGE SUBDIVISION PROPERTY OWNERS ASSOCIATION, INC.

## Current Principal Place of Business:

29 HUNTER RIDGE RD  
MONTICELLO, FL 32344 US

## New Principal Place of Business:

85 CREPE MYRTLE LANE  
MONTICELLO, FL 32344 US

## Current Mailing Address:

29 HUNTER RIDGE RD  
MONTICELLO, FL 32344 US

## New Mailing Address:

85 CREPE MYRTLE LANE  
MONTICELLO, FL 32344 US

FEI Number: 59-3449747

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PRESSLEY, TORI  
29 HUNTER RIDGE RD  
MONTICELLO, FL 32344 US

## Name and Address of New Registered Agent:

SAWYER, CAROLYN  
85 CREPE MYRTLE LANE  
MONTICELLO, FL 32344 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: TORI PRESSLEY

04/15/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: PRESSLEY, KASEY  
Address: 29 HUNTER RIDGE RD  
City-St-Zip: MONTICELLO, FL 32344

Title: ST ( ) Delete  
Name: PRESSLEY, TORI  
Address: 29 HUNTER RIDGE RD  
City-St-Zip: MONTICELLO, FL 32344

Title: D ( ) Delete  
Name: LEVINGS, REBECCA  
Address: P.O. BOX 2042  
City-St-Zip: TALLAHASSEE, FL 32316

Title: VPD ( ) Delete  
Name: HEBERT, EDWARD  
Address: 32 HUNTER RIDGE RD  
City-St-Zip: MONTICELLO, FL 32344

Title: D (X) Delete  
Name: ANDERSEN, RAY  
Address: 701 HUNTER RIDGE RD.  
City-St-Zip: MONTICELLO, FL 32344

Title: D ( ) Delete  
Name: PRINCIPATO, ELISE.  
Address: 555 HUNTER RIDGE ROAD  
City-St-Zip: MONTICELLO, FL 32344

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: ANDERSON, RAY  
Address: 701 HUNTER RIDGE ROAD  
City-St-Zip: MONTICELLO, FL 32344

Title: ST (X) Change ( ) Addition  
Name: SAWYER, CAROLYN  
Address: 85 CREPE MYRTLE LANE  
City-St-Zip: MONTICELLO, FL 32344

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPD (X) Change ( ) Addition  
Name: JACKSON, CATHERINE  
Address: 36 CREPE MYRTLE LANE  
City-St-Zip: MONTICELLO, FL 32344

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: TORI PRESSLEY

FST

04/15/2007

Electronic Signature of Signing Officer or Director

Date