

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000302

FILED
Mar 09, 2009
Secretary of State

Entity Name: HUNTINGTON LAKES ONE ADDITION CONDOMINIUM ASSOCIATES, INC.

Current Principal Place of Business:

HUNTINGTON LAKES 1-A C/O FRITZ PROPERTY
1622 TRIANGLE PALM TERRACE
NAPLES, FL 34119

New Principal Place of Business:

Current Mailing Address:

HUNTINGTON LAKES 1-A C/O FRITZ PROPERTY
1622 TRIANGLE PALM TERRACE
NAPLES, FL 34119

New Mailing Address:

FEI Number: 65-0815601

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRITZ, ROBERT
C/O FRITZ PROPERTY MGMT.
1622 TRIANGLE PALM TERRACE
NAPLES, FL 341193397 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: VPD () Delete
Name: CETINA, HENRY
Address: 49 KATHLEEN LANE
City-St-Zip: MOUNT KISCO, NY 10549

Title: PD () Delete
Name: BIANCO, DONALD
Address: 6496 HUNTINGTON LAKES CIR #102
City-St-Zip: NAPLES, FL 34119

Title: TD () Delete
Name: BIANCO, JOHN
Address: 6416 HUNTINGTON LAKES CIRCLE #101
City-St-Zip: NAPLES, FL 34119

Title: SD () Delete
Name: PATTILIO, RON
Address: 10 GREENTREE DRIVE
City-St-Zip: OAKDALE, NY 11769

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

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: DON BIANCO

PD

03/09/2009

Electronic Signature of Signing Officer or Director

Date