

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000060501

FILED
May 02, 2007
Secretary of State

Entity Name: HUNTER'S CREEK CURVES, INC.

Current Principal Place of Business:

3920 TOWN CENTER BLVD
ORLANDO, FL 32837

New Principal Place of Business:

Current Mailing Address:

3920 TOWN CENTER BLVD
ORLANDO, FL 32837

New Mailing Address:

FEI Number: 26-0094558

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

D'LUGO, EVE H
120 BORADWAY STE 206
KISSIMMEE, FL 34741 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: BUSBY, DIANE
Address: 2973 WHITE CEDAR CIRCLE
City-St-Zip: KISSIMMEE, FL 34741

Title: DVS () Delete
Name: MARSHBURN, DWYNIA
Address: 1514 LEOPARD CT
City-St-Zip: APOPKA, FL 32712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DIANE BUSBY

DPT

05/02/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date