

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 26, 2015
Secretary of State
CC9966525860**Entity Name:** HUNTINGTON LAKES THREE CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**WOODWARD, PIRES & LOMBARDO, P.A.
3200 TAMIAMI TRAIL NORTH, SUITE 200 SUITE 200
NAPLES, FL 34103**Current Mailing Address:**WOODWARD, PIRES & LOMBARDO, P.A.
3200 TAMIAMI TRAIL NORTH, SUITE 200 SUITE 200
NAPLES, FL 34103 US**FEI Number:** 65-0815601**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MURRELL, ROBERT E
WOODWARD, PIRES & LOMBARDO, P.A.
3200 TAMIAMI TRAIL NORTH, SUITE 200 SUITE 200
NAPLES, FL 34103 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:** ROBERT E MURRELL

03/26/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :Title D, VP
Name RAU, LORRAINE
Address 6590 HUNTINGTON LAKES CIRCLE
#204
City-State-Zip: NAPLES FL 34119Title D
Name BURKLOW, KEITH
Address 6260 HUNTINGTON LAKES CIRCLE
#101
City-State-Zip: NAPLES FL 34119Title D P
Name JOHNSON, FLETCHER
Address 6260 HUNTINGTON LAKES CIRCLE
#203
City-State-Zip: NAPLES FL 34119Title D
Name FINN, BILL
Address 2950 MARSHCREEK LANE #102
City-State-Zip: NAPLES FL 34119Title D, SECRETARY
Name FUGGI, JOAN
Address 2555 ASPENCREEK LANE #101
City-State-Zip: NAPLES FL 34119

I hereby 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 all other like empowered.

SIGNATURE: FLETCHER JOHNSON

PRESIDENT

03/26/2015

Electronic Signature of Signing Officer/Director Detail

Date