


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 07, 2008 8:00 am**  
**Secretary of State**

05-07-2008 90104 022 \*\*\*\*61.25

<b>DOCUMENT # N00000007057</b>					
1. Entity Name HIGHLAND BEACH CLUB CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business HIGHLAND BEACH FL 3600 S OCEAN BLVD HIGHLAND BEACH, FL 33487			Mailing Address 3600 S OCEAN BLVD HIGHLAND BEACH, FL 33487		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-1052577	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent  SACHS & SAX 301 YAMATO ROAD, SUITE 4150 BOCA RATON, FL 33431			7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable)  City <b>FL</b> Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P	<input type="checkbox"/> Delete	TITLE	SAME ADDRESS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HORNAK, BARBARA		NAME		
STREET ADDRESS	3606 S OCEAN BLVD #703		STREET ADDRESS	STATUS CHANGE: DIRECTOR	
CITY-ST-ZIP	HIGHLAND BEACH, FL 33487		CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Delete	TITLE	SAME ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CIPRIANO, VICTOR		NAME		
STREET ADDRESS	3594 S OCEAN BLVD, 1-401		STREET ADDRESS	STATUS REMAINS THE SAME: VICE PRESIDENT	
CITY-ST-ZIP	BOCA RATON, FL 33487		CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Delete	TITLE	SAME ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SPADAK, PATRICIA		NAME		
STREET ADDRESS	35945 S OCEAN BLVD #308		STREET ADDRESS	STATUS CHANGE: TREASURER	
CITY-ST-ZIP	HIGHLAND BEACH, FL 33487		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	SAME ADDRESS:	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCGINNIS, PETER		NAME		
STREET ADDRESS	3602 S OCEAN BLVD #102		STREET ADDRESS	STATUS CHANGE: PRESIDENT	
CITY-ST-ZIP	HIGHLAND BEACH, FL 33487		CITY-ST-ZIP		
TITLE	T	<input checked="" type="checkbox"/> Delete	TITLE	OMIT FROM OFFICERS & DIRECTORS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEVY, LAWRENCE		NAME		
STREET ADDRESS	3594 S OCEAN BLVD, 1-203		STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON, FL 33487		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ED BENDER		NAME	STATUS: SECRETARY	
STREET ADDRESS	3606 S. OCEAN BLVD # 503		STREET ADDRESS		
CITY-ST-ZIP	HIGHLAND BEACH, FL 33487		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all the same powers.					
SIGNATURE: _____			Date: 4-29-08		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Daytime Phone #		