

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 29, 2008 8:00 am
Secretary of State

05-29-2008 90191 009 ****61.25

DOCUMENT # N02000003431					
1. Entity Name HIGHLAND CENTER PROPERTY OWNER'S ASSOCIATION, INC.					
Principal Place of Business 1975 SANSBURYS WAY WEST PALM BEACH, FL 33411			Mailing Address PO BOX 210504 ROYAL PALM BEACH, FL 33421		
2. Principal Place of Business - No P.O. Box # 1975 SANSBURYS WAY		3. Mailing Address 1975 SANSBURYS WAY			
Suite, Apt. #, etc. 106		Suite, Apt. #, etc. 106		04212008 Chg-NP CR2E037 (12/06)	
City & State WEST PALM BEACH		City & State WEST PALM BEACH		4. FEI Number 14-7898433	
Zip 33411		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FUCHS, LAWRENCE M 590 ROYAL PALM BEACH BOULEVARD ROYAL PALM BEACH, FL 33411			7. Name and Address of New Registered Agent Name: ROBERT CASSI Street Address (P.O. Box Number is Not Acceptable): 1975 SANSBURYS WAY #105 City: WEST PALM BEACH FL Zip Code: 33411		
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:				DATE: 4-29-08	
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 NAME STREET ADDRESS CITY-ST-ZIP	P CASSIE, ROBERT PO BOX 210504 WEST PALM BEACH, FL 33421	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROBERT CASSI 1975 SANSBURYS WAY 106 WEST PALM BEACH, FL 33411	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CAHILL, DONALD PO BOX 210504 ROYAL PALM BEACH, FL 33421	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DONALD CAHILL 1975 SANSBURYS WAY 106 WEST PALM BEACH, FL 33411	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST FRASER, SHERRON PO BOX 210504 ROYAL PALM BEACH, FL 33421	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SHERRON FRASER 1975 SANSBURYS WAY 106 WEST PALM BEACH, FL 33411	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 other like empowered.					
SIGNATURE:			Date: 4/29/08 Daytime Phone #: 561-756-4788		