

**2008 OFFICIAL REPORT CO. STATE ANNUAL REPORT**

**FILED**  
**Feb 08, 2008 8:00 am**  
**Secretary of State**

02-08-2008 90027 023 \*\*\*\*61.25

**DOCUMENT # N20220**



1. Entity Name  
**HIGHLAND FAIRWAYS PROPERTY OWNERS ASSOCIATION, INC.**

Principal Place of Business  
**3222 HIGHLAND FAIRWAYS BLVD  
 LAKELAND, FL 33810 US**

Mailing Address  
**3222 HIGHLAND FAIRWAYS BLVD  
 LAKELAND, FL 33810 US**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01302008 Chg-NP CR2E037 (12/06)



4. FEI Number  
**59-2794319**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DE FURIO, JAMES  
 201 E. KENNEDY BLVD STE 1460  
 TAMPA, FL 33602**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

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

Signature, typed or printed name of registered agent and title if applicable.

(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.

**\$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 PD  Delete  
 NAME BUNDY, PATRICK L  
 STREET ADDRESS 3284 PEBBLE END DRIVE  
 CITY-ST-ZIP LAKELAND, FL 33810

TITLE D  Change  Addition  
 NAME Verbeke, Judith  
 STREET ADDRESS 1939 Prairie Dunes Cr. N.  
 CITY-ST-ZIP Lakeland, FL 33810

TITLE D  Delete  
 NAME SMUCKER, LARRY  
 STREET ADDRESS 3728 WILDCAT RUN  
 CITY-ST-ZIP LAKELAND, FL 33810

TITLE VD  Change  Addition  
 NAME Smucker, Larry  
 STREET ADDRESS 3728 Wildcat Run  
 CITY-ST-ZIP Lakeland, FL 33810

TITLE SD  Delete  
 NAME SCHAFFER, MILDRED  
 STREET ADDRESS 3212 PRAIRIE DUNES CIRLE W.  
 CITY-ST-ZIP LAKELAND, FL 33810

TITLE D  Change  Addition  
 NAME Hand, Billy  
 STREET ADDRESS 1821 Prairie Dunes Cr. N.  
 CITY-ST-ZIP Lakeland, FL 33810

TITLE D  Delete  
 NAME OSTERLUND, DONALD  
 STREET ADDRESS 3517 HIGHLAND FAIRWAYS BLVD  
 CITY-ST-ZIP LAKELAND, FL 33810

TITLE PD  Change  Addition  
 NAME Minichiello, Thomas  
 STREET ADDRESS 1865 Masters Lane  
 CITY-ST-ZIP Lakeland, FL 33810

TITLE TD  Delete  
 NAME BUSCHER, BERNARD A  
 STREET ADDRESS 3828 WILDCAT RUN  
 CITY-ST-ZIP LAKELAND, FL 33810

Change  Addition

TITLE PD  Delete  
 NAME INICHIELLO, THOMAS  
 STREET ADDRESS 1865 MASTERS  
 CITY-ST-ZIP LAKELAND, FL 33810

Change  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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Thomas Minichiello*

Date

Daytime Phone #

1-30-2008

(813) 859-2212