


**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jul 22, 2004 8:00 am**  
**Secretary of State**

07-22-2004 90007 006 \*\*\*\*61.25

<b>DOCUMENT # N95000003583</b>	
1. Entity Name HIGHLAND FAIRWAYS GOLF CLUB, INC.	

Principal Place of Business 3235 HIGHLAND FAIRWAYS BLVD. LAKELAND, FL 33810 US	Mailing Address 3235 HIGHLAND FAIRWAYS BLVD. LAKELAND, FL 33810 US
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44049445



2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip	Country

07032004 Chg-NP CR2E037 (10/03)

4. FEI Number 59-3326679	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

STEWART, LAWRENCE C JR.  
 659 AVE. A, N.W.  
 WINTER HAVEN, FL 33882

**7. Name and Address of New Registered Agent**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>Filing Fee is \$61.25 Due by September 8, 2004</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	<b>Make check payable to Florida Department of State</b>
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**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV OLSON, GEORGE 3487 HIGHLAND FWYS, BLVD. LAKELAND, FL 33810 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT GLYNN, MARY ANN 3749 WILDCAT RUN LAKELAND, FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP HAND, BILLY 1821 PRAIRIE DUNES CR. N LAKELAND, FL 33810 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLER, WALTER 3121 SAND TRAP COURT LAKELAND, FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS WARNICK, RUTH 5128 SANDTRAP CT. LAKELAND, FL 33810 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILSON, DOLORES 2019 SPYGLASS LAKELAND, FL 33810 <input type="checkbox"/> Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

*See attached*

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:** *MARY ANN GLYNN / Mary Ann Glynn* **7/20/04** **863-858-0947**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

*Att & Counsel*  
44049445 N95000085-83

Highland Fairways Golf Association  
3232 Highland Fairways Blvd.  
Lakeland, FL 33810  
863-858-0947

The following are the officers and directors of Highland Fairways Golf Association:

Title: President  
Name: Olson, George  
Street address : 3487 Highland Fairways Blvd.  
City-St-Zip: Lakeland, FL 33810

Title: Vice-President  
Name: Pepin, Richard  
Street address: 2021-Long Boat Dr.  
City-St-Zip: Lakeland, FL 33810

Title: Secretary  
Name: Kalck, Shirley  
Street address: 3628 Wildcat Run  
City-St-Zip: Lakeland, FL 33810

Title: Treasurer  
Name: Glynn, Mary Ann  
Street address: 3749 Wildcat Run  
City-St-Zip: Lakeland, FL 33810

Title: Director  
Name: Hand, Bettye  
Street address: 1821 Prairie Dunes Cr. N.  
City-St-Zip: Lakeland, FL 33810

Title: Director  
Name: Miller, Walter  
Street address: 3121 Sandtrap Ct.  
City-St-Zip: Lakeland, FL 33810

Title: Director  
Name: Hutchinson, Michael  
Street address: 3175 Pebble Bend Dr.  
City-St-Zip: Lakeland, FL 33810