

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jul 11, 2007
Secretary of State**

DOCUMENT# N96000001103

Entity Name: HIGHLANDS GLEN HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

222 HIGHLANDS GLEN CIR
WINTER SPRINGS, FL 32708 US

New Principal Place of Business:

Current Mailing Address:

222 HIGHLANDS GLEN CIR
WINTER SPRINGS, FL 32708 US

New Mailing Address:

FEI Number: 59-3446145 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SPENCE, GRACE
222 HIGHLANDS GLEN CIR
WINTER SPRINGS, FL 32708 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: JACOBS, MARGE
Address: 236 HIGHLANDS GLEN CIRCLE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: PD () Delete
Name: EVANS, KATHLEEN
Address: 238 HIGHLANDS GLEN CIRCLE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: TD () Delete
Name: SPENCE, GRACE
Address: 222 HIGHLANDS GLEN CIRCLE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D () Delete
Name: SHELLY, LESLIE
Address: 228 HIGHLANDS GLEN CIRCLE
City-St-Zip: WINTER SPRINGS, FL 32708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: GRACE SPENCE

T

07/11/2007

Electronic Signature of Signing Officer or Director

_____ Date