2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2008 8:00 am
Secretary of State
04-07-2008 90065 022 ****61.25

DOCUMENT # 770207

1. Entity Name
HIGHGROVE HOMEOWNERS' ASSOCIATION, INC.

40061879

Principal Place of Business	Mailing Address
3491-11 THOMASVILLE ROAD PMB 101 TALLAHASSEE, FL 32309-3537	3491-11 THOMASVILLE ROAD PMB 101 TALLAHASSEE, FL 32309-3537

04032008 Chg-NP CR2E037 (12/06)

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

4. FEI Number 59-2567750 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

COLE, BRAD
4751 HIGHGROVE RD.
TALLAHASSEE, FL 32309

7. Name and Address of New Registered Agent

Name BILL BASSETT
Street Address (P.O. Box Number is Not Acceptable)
4491 GLEN CASTLE DR
City TALLAHASSEE **FL** Zip Code 32309

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 Bill Bassett BILL BASSETT, PRES 4-4-08
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD COLE, BRAD 4751 HIGHGROVE RD TALLAHASSEE, FL 32309	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BILL BASSETT 4491 GLEN CASTLE DR TALLAHASSEE, FL 32309	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD BASSETT, BILL 4491 GLEN CASTLE DR. TALLAHASSEE, FL 32309	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD SUZI COLLEDGE 4546 HIGHGROVE RD TALLAHASSEE, FL 32309	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SMITH, MIKE 4979 GLEN CASTLE DR. TALLAHASSEE, FL 32309	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KATHLEEN BRENNAN 4778 LANCASHIRE LN TALLAHASSEE, FL 32309	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MCCAULEY, MARGUERITE 4936 HIGHGROVE RD. TALLAHASSEE, FL 32309	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SUE GRINER 2009 CHATSWORTH WAY TALLAHASSEE, FL 32309	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD REGIER, SHARYN 4910 ARDEN FOREST TALLAHASSEE, FL 32309	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SUSAN SANDERS 4679 HIGHGROVE RD TALLAHASSEE, FL 32309	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D COLLEDGE, SUZI 4546 HIGHGROVE RD TALLAHASSEE, FL 32309	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MARCY GRAVES 1904 CHATSWORTH WAY TALLAHASSEE, FL 32309	☐ 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: Bill Bassett BILL BASSETT 4-4-08 850-668-6160
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #