SECTION 1, INC.	
Current Principal Place of Business:	
204 MANATEE LANE	
FT PIERCE, FL 34982-6779	
Current Mailing Address:	
204 MANATEE LANE	
FT PIERCE, FL 34982-6779	

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: HIGH POINT OF FORT PIERCE CONDOMINIUM ASSOCIATION

## FEI Number: 59-1667970

DOCUMENT# 728961

Name and Address of Current Registered Agent:

DIPALMA, STEVEN 204 MANATEE LANE FORT PIERCE, FL 34982 US Certificate of Status Desired: No

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

## **Officer/Director Detail :**

••			
Title	SECRETARY, DIRECTOR	Title	PRESIDENT, DIRECTOR
Name	PRESLEY, DORIS M	Name	DIPALMA, STEVEN
Address	112 C LAKES END DRIVE	Address	516 A CROOKED LAKE LANE
City-State-Zip:	FT PIERCE FL 34982	City-State-Zip:	FT PIERCE FL 34981
		<b>T</b> .u.,	
Title	DIRECTOR	Title	TREASURER, DIRECTOR
Name	HAKES, SALLY	Name	NAIL, GENE
Address	927 D SAVANNAS POINT DRIVE	Address	418 C SANDPIPER DRIVE
City-State-Zip:	FT PIERCE FL 34982	City-State-Zip:	FT PIERCE FL 34982
Title	VP, DIRECTOR		
Name	FINNEGAN, JUDY		
Address	921 D SAVANNAS POINT DRIVE		
City-State-Zip:	FT. PIERCE FL 34982		

I hereby 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 all other like empowered.

SIGNATURE: GENE NAIL
----------------------

TREASURER

01/15/2018

Date

Electronic Signature of Signing Officer/Director Detail