#### 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 755501** 

Entity Name: HIGHLAND LAKES DUPLEX VILL. I HOMEOWNERS' ASSOC.

FILED
Mar 07, 2016
Secretary of State
CC8802534306

# **Current Principal Place of Business:**

C/O CALIBER CONDO MGT IN 32708 US 319 NORTH PALMHARBOR, FL 34684

# **Current Mailing Address:**

C/O CALIBER CONDO MGT IN 32708 US #19 NORTH PALM HARBOR, FL 34684 US

FEI Number: 59-2192600 Certificate of Status Desired: No

#### Name and Address of Current Registered Agent:

JONES, SHIRLEY H C/O CALIBER COND MGT. 32708 US #19 NORTH PALM HARBOR, FL 34684 US

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

### Officer/Director Detail:

Title	TD	Title	PD
riue	עו	Title	רט

NameHUGHEY, ANNNameDAVIS, MICHAELAddress3447 MACLAREN DRIVEAddress3445 MACLAREN DR.City-State-Zip:PALM HARBOR FL 34684City-State-Zip:PALM HARBOR FL 34684

Title VP Title D

NamePFLEEGER, MARJORIENameHUSSEY, EDWARDAddress3482 MACLAREN DR.Address3458 MACLAREN DRIVECity-State-Zip:PALM HARBOR FL 34684City-State-Zip:PALM HARBOR FL 34684

Title S

Name SACKETT, KATHLEEN
Address 3438 MACLAREN DRIVE
City-State-Zip: PALM HARBOR FL 34684

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: MICHAEL DAVIS PRESIDENT 03/07/2016