

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770207

Entity Name: HIGHGROVE HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**1400 VILLAGE SQUARE BLVD
SUITE 3-102
TALLAHASSEE, FL 32312-1250**Current Mailing Address:**1400 VILLAGE SQUARE BLVD
SUITE 3-102
TALLAHASSEE, FL 32312-1250**FEI Number:** 59-2567750**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BRODIE, JAMES
4911 ARDEN FOREST WAY
TALLAHASSEE, FL 32309 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:** JAMES BRODIE

03/31/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name BRODIE, JAMES
Address 4911 ARDEN FOREST WAY
City-State-Zip: TALLAHASSEE FL 32309

Title SECRETARY
Name LAMPKIN, BILL
Address 4738 HIGHGROVE ROAD
City-State-Zip: TALLAHASSEE FL 32309

Title D
Name CLOUSE, SHERYL
Address 4766 HIGHGROVE RD
City-State-Zip: TALLAHASSEE FL 32309

Title PRESIDENT
Name TUCKER, KEN
Address 4595 HIGHGROVE
City-State-Zip: TALLAHASSEE FL 32309

Title TREASURER
Name BASHAW, PATRICIA
Address 4923 ARDEN FOREST
City-State-Zip: TALLAHASSEE FL 32309

Title DIRECTOR
Name ANTOHI, JORDAN
Address 4835 HIGHGROVE
City-State-Zip: TALLAHASSEE FL 32309

Title DIRECTOR
Name COOGAN, JIM
Address 4618 HIGHGROVE
City-State-Zip: TALLAHASSEE FL 32309

Title BOOKKEPPING FIRM
Name RHINEHART, ROBERT
Address 644 CAPITAL CIRCLE
City-State-Zip: TALLAHASSEE FL 32301

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: ROBERT S RHINEHART

BOOKKEPPING FIRM

03/31/2016

Electronic Signature of Signing Officer/Director Detail

Date