

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 23, 2021
Secretary of State
8722620407CC

Entity Name: HIGHLANDS OF PASCO COUNTY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O FIRST CHOICE ASSOCIATION MGMT, INC.
4174 WOODLANDS PARKWAY
PALM HARBOR, FL 34685

Current Mailing Address:

C/O FIRST CHOICE ASSOCIATION MGMT, INC.
4174 WOODLANDS PARKWAY
PALM HARBOR, FL 34685

FEI Number: 20-2747829

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NOLAN, MARGARET
4174 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 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: MARGARET NOLAN

02/23/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name LITTLEFIELD, ELIZABETH
Address 4174 WOODLANDS PARKWAY
City-State-Zip: PALM HARBOR FL 34685

Title SECRETARY
Name STANTZ, KAREN
Address 4174 WOODLANDS PARKWAY
City-State-Zip: PALM HARBOR FL 34685

Title DIRECTOR
Name LAVENGOOD, MARY
Address 4174 WOODLANDS PARKWAY
City-State-Zip: PALM HARBOR FL 34685

Title TREASURER
Name NOLLER, JONATHON
Address 4174 WOODLANDS PARKWAY
City-State-Zip: PALM HARBOR FL 34685

Title VP
Name MARCUS, HAL
Address C/O FIRST CHOICE ASSOCIATION
MGMT, INC.
4174 WOODLANDS PARKWAY
City-State-Zip: PALM HARBOR FL 34685

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: ELIZABETH LITTLEFIELD

PRESIDENT

02/23/2021

Electronic Signature of Signing Officer/Director Detail

Date