2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20220

Entity Name: HIGHLAND FAIRWAYS PROPERTY OWNERS ASSOCIATION,

INC.

Mar 01, 2023 **Secretary of State** 8805604361CC

FILED

Current Principal Place of Business:

3222 HIGHLAND FAIRWAYS BLVD LAKELAND, FL 33810

Current Mailing Address:

3222 HIGHLAND FAIRWAYS BLVD LAKELAND, FL 33810 US

FEI Number: 59-2794319 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MASI, JOHN L ESQ. 801 N ORANGE AVENUE SUITE 500 ORLANDO, FL 32801 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:

Address

Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title PRESIDENT, DIRECTOR Title VP, DIRECTOR STOWELL, JEFFREY Name Name AUSTIN, DIANE

3222 HIGHLAND FAIRWAYS Address Address 3222 HIGHLAND FAIRWAYS

BOULEVARD BOULEVARD

LAKELAND FL 33810 City-State-Zip: LAKELAND FL 33810 City-State-Zip:

Title SECRETARY, DIRECTOR Title TREASURER, DIRECTOR Name MILES, CATHERINE Name BOURDEAU, BERNIE

3222 HIGHLAND FAIRWAYS 3222 HIGHLAND FAIRWAYS BLVD Address Address

BOULEVARD

City-State-Zip: LAKELAND FL 33810 City-State-Zip: LAKELAND FL 33810

Title OPS II, DIRECTOR Title OPS I, DIRECTOR Name BARNES, DON

Name BISSONNETTE, PAT Address 3222 HIGHLAND FAIRWAYS

3222 HIGHLAND FAIRWAYS **BOULEVARD BOULEVARD**

City-State-Zip: LAKELAND FL 33810 LAKELAND FL 33810

City-State-Zip:

Title COMMUNITY ASSOCIATION Title OPS III, DIRECTOR MANAGER

Name NELSON, KEN Name BERRY, SHANNON

Address 3222 HIGHLAND FAIRWAYS Address 3222 HIGHLAND FAIRWAYS

> **BOULEVARD BOULEVARD**

LAKELAND FL 33810 LAKELAND FL 33810 City-State-Zip: City-State-Zip:

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: SHANNON BERRY CAM 03/01/2023