


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2004 08:00 AM
Secretary of State

DOCUMENT # 714300

1. Entity Name
 SKY LAKE - HIGHLAND LAKES AREA HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business GLENN GOPMAN 2010 NE 198TH TERRACE MIAMI, FL 33179	Mailing Address GLENN GOPMAN 2010 NE 198TH TERRACE MIAMI, FL 33179
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01162004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2260378	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JAY, SCOTT R
 1575 IVES DAIRY ROAD
 MIAMI, FL 33179

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD FRIED, SUSAN 1875 NE 197TH TERRACE MIAMI, FL 33179
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PROMOFF, DAVID 19841 N.E. 23 AVE MIAMI, FL 33180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD GOPMAN, GLENN 2010 198TH TERRACE MIAMI, FL 33179
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PEREZ, JILL 21211 NE 25TH COURT MIAMI, FL 33180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD JAY, SCOTT 1575 IVES DAIRY ROAD MIAMI, FL 33179
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BRAVERMAN, MORT 20510 NE 19TH AVE MIAMI, FL 33179

000000012779
 01/26/04-80024-015 70.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Glenn Gopman GLENN GOPMAN 1/21/04 305-466-9770
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #