

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 91007 031 *****61.25

DOCUMENT # 725926			
1. Entity Name HIGHLANDS HOMEOWNERS' ASSOCIATION, INC.			
Principal Place of Business 2200 SHEPARD ROAD WINTER SPRINGS FL 32708 US		Mailing Address 2200 SHEPARD ROAD WINTER SPRINGS FL 32708 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



MOORE CR2E037 (11/03)

4. FEI Number 59-1462898	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent MCCULLOH, NEAL 1065 MAITLAND CENTER COMMONS BLVD MAITLAND FL 32751		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 _____

**FILE NOW: FEE IS \$61.25
Due By May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P ROSS, JERRY 620 DARON CT. WINTER SPRINGS FL 32708 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Hinton, Paige 202 Silver Seas Winter Springs, FL 32708 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD BUSCEMI, PAUL 692 MARK RUN WINTER SPRINGS FL 32708 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP/TD Buscemi, Paul 629 Clearn Ct. Winter Springs, FL 32708 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD JOHNSON, WILLIAM 503 MARK RUN WINTER SPRINGS FL 32708 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Ailen, Ronnie 628 Clearn Ct. Winter Springs, FL 32708 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SCHWARZ, HELGA 720 GALLOWAY CT WINTER SPRINGS FL 32708 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD WARE, BARBARA 336 MACGREGOR ROAD WINTER SPRINGS FL 32708 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Stewart, Mary 424 MacGregor Rd. Winter Springs, FL 32708 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MOYER, KEN 829 DUNBAR TERR. WINTER SPRINGS FL 32708 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD Christman, Dan 817 Dundee Dr Winter Springs, FL 32708 ☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-21-04

407-327-0640