

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726563

FILED  
Apr 24, 2008  
Secretary of State

**Entity Name:** HIGH POINT OF ORLANDO CONDOMINIUM ASSOCIATION SECTION 1, INC.

**Current Principal Place of Business:**

1475 HIGHPOINT BLVD.  
ORLANDO, FL 32825

**New Principal Place of Business:**

**Current Mailing Address:**

1475 HIGHPOINT BLVD.  
ORLANDO, FL 32825

**New Mailing Address:**

**FEI Number:** 59-1750268

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MILLER, JUDY  
11104 ACME DR  
ORLANDO, FL 32825 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BUCHANAN, BARBARA  
Address: 1316 MESA DR  
City-St-Zip: ORLANDO, FL 32825

Title: VP ( ) Delete  
Name: PEREZ, LILLIAN  
Address: 1472 HIGH POINT BOULEVARD  
City-St-Zip: ORLANDO, FL 32825

Title: TD ( ) Delete  
Name: COX, BENJAMIN  
Address: 1318 MESA DR  
City-St-Zip: ORLANDO, FL 32825

Title: D ( ) Delete  
Name: CAMPBELL, BRIAN  
Address: 1478 HIGH POINT BLVD  
City-St-Zip: ORLANDO, FL 32825

Title: S ( ) Delete  
Name: MILLER, JUDY  
Address: 11104 ACME DR  
City-St-Zip: ORLANDO, FL 32825

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: FARGNOLI, CHRIS  
Address: 1474 HIGH POINT BLVD  
City-St-Zip: ORLANDO, FL 32825

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JUDY MILLER

S

04/24/2008

Electronic Signature of Signing Officer or Director

Date