FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

100001761611
-03/28/96--01088--032
***61.25

DOCUMENT # **731609** **(4)**

1. Corporation Name

HIGHLAND MEADOWS ESTATES ASSOCIATION, INC.

Principal Place of Business	Mailing Address
109 N.W. 53RD CT. POMPANO BEACH FL 33064	109 N.W. 53RD CT. POMPANO BEACH FL 33064

3. Date Incorporated or Qualified: **01/13/1975**
3a. Date of Last Report: **07/10/1995**

2. Principal Place of Business — 21:
Suite, Apt. #, etc. — 22:
City & State — 23:
Zip — 24: Country — 25:

2a. Mailing Address — 26:
Suite, Apt. #, etc. — 27:
City & State — 28:
Zip — 29: Country — 30:

4. FEI Number: **59-1860949** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. **Name and Address of Current Registered Agent**

NAVONE, EONALD
124 NW 53RD STREET
POMPANO BEACH FL 33064

10. **Name and Address of New Registered Agent**

81 Name: Jacques Beauchamp
82 Street Address (P.O. Box Number is Not Acceptable): 130 NW 52ND CT.
83:
84 City: Pompano Beach FL 33064 **FL** 85 Zip Code: 33064

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Jacques Beauchamp (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent's signature required when restating) DATE: MARCH 11 - 96

12. OFFICERS AND DIRECTORS			13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	V	☒ DELETE	11 TITLE	V+S	☐ Change ☒ Addition
NAME	RENOIT, MARCEL		12 NAME	JANE WOLFE	
STREET ADDRESS	5334 NW 1ST AVENUE		13 STREET ADDRESS	132 NW 53RD PL.	
CITY-ST-ZIP	POMPANO BEACH FL		14 CITY-ST-ZIP	Pompano Beach FL 33064	
TITLE	S	☒ DELETE	21 TITLE	T	☐ Change ☒ Addition
NAME	JORDAN, JORGIA		22 NAME	Rosella STRIGHT	
STREET ADDRESS	5318 NW 1ST AVENUE		23 STREET ADDRESS	150 NW 52ND CT	
CITY-ST-ZIP	POMPANO BEACH FL		24 CITY-ST-ZIP	Pompano Beach FL 33064	
TITLE	T	☐ DELETE	31 TITLE	D	☒ Change ☐ Addition
NAME	HOSKINS, FLOYD R		32 NAME	HOSKINS FLOYD R	
STREET ADDRESS	123 NW 53RD STREET		33 STREET ADDRESS	123 NW 53RD STREET	
CITY-ST-ZIP	POMPANO BEACH FL		34 CITY-ST-ZIP	Pompano Beach FL 33064	
TITLE	D	☐ DELETE	41 TITLE	P Jacques Beauchamp	☐ Change ☒ Addition
NAME	MANUEL, PIRES		42 NAME	130 NW 52ND CT	
STREET ADDRESS	119 NW 52ND COURT		43 STREET ADDRESS		
CITY-ST-ZIP	POMPANO BEACH FL		44 CITY-ST-ZIP	Pompano Beach FL 33064	
TITLE	D	☒ DELETE	51 TITLE	D	☐ Change ☒ Addition
NAME	COVELL, DOUGLAS		52 NAME	John Niblock	
STREET ADDRESS	165 NW 51ST STREET		53 STREET ADDRESS	134 NW 53RD CT	
CITY-ST-ZIP	POMPANO BEACH FL		54 CITY-ST-ZIP	Pompano Beach FL 33064	
TITLE	D	☒ DELETE	61 TITLE	D	☐ Change ☐ Addition
NAME	DAMONE, JACK		62 NAME	Louis Bracero	
STREET ADDRESS	5358 NW 1ST AVENUE		63 STREET ADDRESS	130 NW 52ND CT	
CITY-ST-ZIP	POMPANO BEACH FL		64 CITY-ST-ZIP	Pompano Beach FL 33064	

CR2E037 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jacques Beauchamp Jr President March 11 96 305 421-1376

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) (Date) (Daytime Phone #)