

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

FILED
Mar 03, 2004 8:00 am
Secretary of State

03-03-2004 90002 032 ****61.25

DOCUMENT # 731609

1. Entity Name

HIGHLAND-MEADOWS-ESTATES-ASSOCIATION, INC.



Principal Place of Business

109 N.W. 53RD CT.
DEERFIELD BEACH FL 33064

Mailing Address

109 N.W. 53RD CT.
DEERFIELD BEACH FL 33064

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1860949

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RUSSELL, LIBBEY
5356 NW 1ST WAY
DEERFIELD BEACH FL 33064

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(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

TITLE **S** ☒ Delete
NAME **GOLDING, ELAINE**
STREET ADDRESS **126 NW 53RD COURT**
CITY-ST-ZIP **DEERFIELD BEACH FL 33064**

TITLE **T** ☐ Delete
NAME **VANICEK, RICHARD**
STREET ADDRESS **129 NW 51ST CT**
CITY-ST-ZIP **DEERFIELD BEACH FL 33064**

TITLE **D** ☒ Delete
NAME **NASON, BARBARA**
STREET ADDRESS **5331 NW 1ST WAY**
CITY-ST-ZIP **DEERFIELD BEACH FL 33064**

TITLE **V** ☐ Delete
NAME **BAKER, ROSEMARY**
STREET ADDRESS **5317 NW 1ST WAY**
CITY-ST-ZIP **DEERFIELD BEACH FL 33064**

TITLE **P** ☐ Delete
NAME **LIBBEY, RUSSELL**
STREET ADDRESS **5356 NW 1ST WAY**
CITY-ST-ZIP **DEERFIELD BEACH FL 33064**

TITLE **D** ☒ Delete
NAME **DUNWIDDIE, BETSIE**
STREET ADDRESS **126 NW 51ST STREET**
CITY-ST-ZIP **DEERFIELD BEACH FL 33064**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **S** ☐ Change ☒ Addition
NAME **Baxter, Judith**
STREET ADDRESS **117 NW 53rd PL**
CITY-ST-ZIP **Deerfield Beach, FL 33064** ☐ Change ☐ Addition

TITLE **D** ☐ Change ☒ Addition
NAME **Peck, Rose**
STREET ADDRESS **153 NW 52nd Court**
CITY-ST-ZIP **Deerfield Beach, FL 33064** ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **D** ☐ Change ☒ Addition
NAME **Spangler, Richard**
STREET ADDRESS **139 NW 51st ST**
CITY-ST-ZIP **Deerfield Beach, FL 33064** ☐ 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

Russell Libbey 02/27/04 ⁹⁵⁴ 421-7373

Date

Daytime Phone #

Attachment
Doc. # 731609

54014219

10

X Delete

D
Lakeman, John
137 NW 53rd PL
Deerfield Beach, FL 33064

11

X Addition

D
Damone, Jack
5358 NW 1st AV
Deerfield Beach, FL 33064