

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

DOCUMENT # 733638 (1)
1. Corporation Name
HIGHLAND LAKES CONDOMINIUM IV ASSOCIATION, INC.



Principal Place of Business Mailing Address
C/O INFINITI PROPERTY MANAGEMENT, INC.
1301 SEMINOLE BLVD. SUITE 110
LARGO FL 34640
US

3. Date Incorporated or Qualified **08/22/1975** 3a. Date of Last Report **04/17/1995**
4. FEI Number **59-1616964** 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

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip Country 29 Zip Country 30

9. Name and Address of Current Registered Agent

**INFINITI PROPERTY MANAGEMENT INC.
1301 SEMINOLE BLVD., STE. 110
LARGO FL 34640-5183**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FIX, KEN	1.2 NAME	
STREET ADDRESS	2712-A WHITEBRIDGE	1.3 STREET ADDRESS	
CITY-ST-ZIP	PALM HARBOR, FL 00000	1.4 CITY-ST-ZIP	
TITLE	T <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KURK, MAUDE	2.2 NAME	ERICKSON, ROY
STREET ADDRESS	2638 B HIGHLANDS BLVD.	2.3 STREET ADDRESS	2638-B HIGHLANDS BLVD.
CITY-ST-ZIP	PALM HARBOR, FL 00000	2.4 CITY-ST-ZIP	PALM HARBOR, FL 34684
TITLE	S <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FIX, PAULINE	3.2 NAME	
STREET ADDRESS	2712-A WHITEBRIDGE DR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	PALM HARBOR, FL 00000	3.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KRASINSKI, ED	4.2 NAME	
STREET ADDRESS	2638 D HIGHLANDS BLVD	4.3 STREET ADDRESS	
CITY-ST-ZIP	PALM HARBOR FL	4.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WELCH, VIOLA	5.2 NAME	ISABELLA, FRED
STREET ADDRESS	1305-A WHITEBRIDGE DR.	5.3 STREET ADDRESS	1309-B WHITEBRIDGE DR.
CITY-ST-ZIP	PALM HARBOR FL	5.4 CITY-ST-ZIP	PALM HARBOR, FL 34684
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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: Kenneth C. Fix Kenneth Fix

Date

Daytime Phone

CR2E037 (12/95)