

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 # **737003** (4)

1. Corporation Name

HOMEOWNERS ASSOCIATION OF HIGHLAND LAKES, INC.



Principal Place of Business

Mailing Address

**3300 MACGREGOR DR.
PALM HARBOR FL 34684**

**3300 MACGREGOR DR.
PALM HARBOR FL 34684**

3. Date Incorporated or Qualified
10/08/1976

3a. Date of Last Report
03/03/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**RABIN, BENNETT L ESO
5999 CENTRAL AVENUE
SUITE 104
ST. PETERSBURG FL 33710**

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

TITLE	T	☒ DELETE
NAME	WILLIAMS, G.E	
STREET ADDRESS	3300 MACGREGOR DR.	
CITY - ST - ZIP	PALM HARBOR FL	
TITLE	PF	☒ DELETE
NAME	BROWN, JEREMIAH J	
STREET ADDRESS	3300 MACGREGOR DR.	
CITY - ST - ZIP	PALM HARBOR FL	
TITLE	SD	☐ DELETE
NAME	GOOD, CLARE	
STREET ADDRESS	3300 MACGREGOR DR.	
CITY - ST - ZIP	PALM HARBOR FL	
TITLE	VD	☐ DELETE
NAME	HOYT, STAN	
STREET ADDRESS	3300 MACGREGOR DR.	
CITY - ST - ZIP	PALM HARBOR FL	
TITLE	VD	☒ DELETE
NAME	NORTH, JOHN T	
STREET ADDRESS	3300 MACGREGOR	
CITY - ST - ZIP	PALM HARBOR FL	
TITLE	VD	☐ DELETE
NAME	BACKLUND, R.A.	
STREET ADDRESS	3300 MCGREGOR DR	
CITY - ST - ZIP	PALM HARBOR FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	T	☐ Change ☒ Addition
1.2 NAME	Engle, Paul H.	
1.3 STREET ADDRESS	3300 MacGregor Drive	
1.4 CITY - ST - ZIP	Palm Harbor, FL 34684	
2.1 TITLE	VD	☐ Change ☒ Addition
2.2 NAME	Castellani, George	
2.3 STREET ADDRESS	3300 MacGregor Drive	
2.4 CITY - ST - ZIP	Palm Harbor, FL 34684	
3.1 TITLE	VD	☒ Change ☐ Addition
3.2 NAME	Good, Clare	
3.3 STREET ADDRESS	3300 MacGregor Drive	
3.4 CITY - ST - ZIP	Palm Harbor, FL 34684	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE	SD	☐ Change ☒ Addition
5.2 NAME	Atkerson, Colleen	
5.3 STREET ADDRESS	3300 MacGregor Drive	
5.4 CITY - ST - ZIP	Palm Harbor, FL 34684	
6.1 TITLE	PD	☒ Change ☐ Addition
6.2 NAME	Backlund, R.A.	
6.3 STREET ADDRESS	3300 MacGregor Drive	
6.4 CITY - ST - ZIP	Palm Harbor, FL 34684	

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: *Stanley B. Hoyt*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STANLEY B. HOYT 2/16/96 813-784-1402

Date

Daytime Phone #

CR2E037 (12/95)