

4-21-97 B-5120 C
FILE NOW: FILING FEE IS \$61.25

FILED
Apr 21 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **737003** (4)
1. Corporation Name
HOMEOWNERS ASSOCIATION OF HIGHLAND LAKES, INC.



Principal Place of Business 3300 MACGREGOR DR. PALM HARBOR FL 34684	Mailing Address 3300 MACGREGOR DR. PALM HARBOR FL 34684-2348
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 10/08/1976		3a. Date of Last Report 02/21/1996	
				4. FEI Number 59-1726864		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

10. Name and Address of New Registered Agent

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

81 Name Hirsch de Haan, Ellen ESQ
82 Street Address (P.O. Box Number is Not Acceptable) 33 North Garden Avenue
83 Suite Suite 960
84 City Clearwater
85 Zip Code FL 34615

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 *Ellen Hirsch de Haan*
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/2/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	ENGLE, PAUL H.	1.2 NAME	
STREET ADDRESS	3300 MACGREGOR DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	PALM HARBOR FL	1.4 CITY-ST-ZIP	
TITLE	☐ DELETE	2.1 TITLE	☒ Change ☐ Addition
NAME	CASTELLANI, GEORGE	2.2 NAME	Castellani, George
STREET ADDRESS	3300 MACGREGOR DRIVE	2.3 STREET ADDRESS	3300 MacGregor Drive
CITY-ST-ZIP	PALM HARBOR FL	2.4 CITY-ST-ZIP	Palm Harbor, FL 34684
TITLE	☒ DELETE	3.1 TITLE	☐ Change ☒ Addition
NAME	GOOD, CLARE	3.2 NAME	Scenna, Beverly
STREET ADDRESS	3300 MACGREGOR DR.	3.3 STREET ADDRESS	3300 MacGregor Drive
CITY-ST-ZIP	PALM HARBOR FL	3.4 CITY-ST-ZIP	Palm Harbor, FL 34684
TITLE	☒ DELETE	4.1 TITLE	☐ Change ☒ Addition
NAME	HOYT, STAN	4.2 NAME	Manning, Frank
STREET ADDRESS	3300 MACGREGOR DR.	4.3 STREET ADDRESS	3300 MacGregor Drive
CITY-ST-ZIP	PALM HARBOR FL	4.4 CITY-ST-ZIP	Palm Harbor, FL 34684
TITLE	☐ DELETE	5.1 TITLE	☒ Change ☐ Addition
NAME	ATKERSON, COLLEEN	5.2 NAME	Atkerson, Colleen
STREET ADDRESS	3300 MACGREGOR DRIVE	5.3 STREET ADDRESS	3300 MacGregor Drive
CITY-ST-ZIP	PALM HARBOR FL	5.4 CITY-ST-ZIP	Palm Harbor, FL 34684
TITLE	☒ DELETE	6.1 TITLE	☐ Change ☒ Addition
NAME	BACKLUND, R.A.	6.2 NAME	Ramsay, Robert
STREET ADDRESS	3300 MACGREGOR DR	6.3 STREET ADDRESS	3300 MacGregor Drive
CITY-ST-ZIP	PALM HARBOR FL	6.4 CITY-ST-ZIP	Palm Harbor, FL 34684

14. I do 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 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 *Robert Ramsay*

3-28-97

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CR2E037 (9/96)