2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739131

FILED Jan 31, 2009 Secretary of State

Entity Name: HIGHLAND LAKES CONDOMINIUM VII ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

40347 US 19 N STE 229

TARPON SPRINGS, FL 34689 US

Current Mailing Address: New Mailing Address:

40347 US 19 N STE 229

TARPON SPRINGS, FL 34689 US

FEI Number: 59-1750536 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROBERT L. TANKEL, P.A. CITADEL PROP MGMT GRP INC

1022 MAIN STREET 40347 US 19 N

SUITE D STE 229

DUNEDIN, FL 34698 US TARPON SPRINGS, FL 34689 US

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.

SIGNATURE: JIM RANALLO, LCAM 01/31/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: PD () Delete Title: () Change() Addition

 Name:
 SMITH, JOHN A
 Name:

 Address:
 1107 B QUEEN ANNE DR.
 Address:

 City-St-Zip:
 PALM HARBOR, FL 34684
 City-St-Zip:

Title: TD () Delete Title: STD (X) Change () Addition Name: SCHRADER, MARIE SCHRADER, MARIE

 Name:
 SCHRADER, MARIE

 Address:
 1107 QUEEN ANNE DR

 City-St-Zip:
 PALM HARBOR, FL 34684

 City-St-Zip:
 PALM HARBOR, FL 34684

Title: SD () Delete Title: VPD (X) Change () Addition

Name: KOSCH, KATHLEEN Name: ROSET, ART

 Address:
 1115-B QUEENANNE DR
 Address:
 1115-A QUEENANNE DR

 City-St-Zip:
 PALM HARBOR, FL 34684
 City-St-Zip:
 PALM HARBOR, FL 34684

Title: VPD (X) Delete Title: () Change () Addition

 Name:
 SMITH, ELAINÉ
 Name:

 Address:
 1107 B QUEEN ANNE DR
 Address:

 City-St-Zip:
 PALM HARBOR, FL 34684
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JIM RANALLO, LCAM MGR 01/31/2009