FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

'95 APR 26 AM 11:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **741399** **(0)**

1. Corporation Name

HIGHLAND LAKES CONDOMINIUM VIII ASSOCIATION, INC

Principal Place of Business	Mailing Address
1700 MCMULLEN BOOTH ROAD SUITE C-3 CLEARWATER FL 34619 US	1700 MCMULLEN BOOTH ROAD SUITE C-3 CLEARWATER FL 34619 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/19/1978
3a. Date of Last Report: 02/22/1994
4. FEI Number: 59-1792436 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 c/o Infiniti Property Mgt.	26 c/o Infiniti Property Mgt.
Suite, Apt. #, etc. 22 1301 Seminole Blvd., #110	Suite, Apt. #, etc. 27 1301 Seminole Blvd., #110
City & State 23 Largo, FL	City & State 28 Largo, FL
Zip / Country 24 34640 / 25 U.S.A.	Zip / Country 29 34640 / 30 U.S.A.

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — $68.75 Supplemental Fee Not Required
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
HICKS, JOYCE M. 1700 MCMULLEN BOOTH RD., #C-3 CLEARWATER FL 34619	81 Name: Infiniti Property Management, Inc. 82 Street Address (P.O. Box Number is Not Acceptable): 1301 Seminole Blvd., Suite 110 83 84 City: Largo FL 85 Zip Code: 34640

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Paul P Nolan — 4-10-95
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	11 TITLE		☒ Change ☐ Addition
NAME	KORTLANDT, KARL	12 NAME	FULTON, PHILIP	
STREET ADDRESS	2821-A SHERBROOKE LN	13 STREET ADDRESS	2846-D HIGHLANDS BLVD.	
CITY-ST-ZIP	PALM HABOR FL	14 CITY-ST-ZIP	PALM HARBOR, FL 34684	
TITLE	VD	21 TITLE	T/D	☒ Change ☐ Addition
NAME	DINATALE, JIM	22 NAME		
STREET ADDRESS	2842-B HIGHLAND BLVD	23 STREET ADDRESS		
CITY-ST-ZIP	PALM HARBOR FL	24 CITY-ST-ZIP		
TITLE	SD	31 TITLE		☒ Change ☐ Addition
NAME	CHAPMAN, LARRY	32 NAME	PLUMMER, MALCOLM	
STREET ADDRESS	2827-B SHERBROOKE LN	33 STREET ADDRESS	2809-B SHERBROOKE LANE	
CITY-ST-ZIP	PALM HABOR FL	34 CITY-ST-ZIP	PALM HARBOR, FL 34684	
TITLE	TD	41 TITLE	V/D	☒ Change ☐ Addition
NAME	GEROW, JAMES	42 NAME	HYDE, STUART	
STREET ADDRESS	2815-D SHERBROOKE LN	43 STREET ADDRESS	2815-C SHERBROOKE LANE	
CITY-ST-ZIP	PALM HARBOR FL	44 CITY-ST-ZIP	PALM HARBOR, FL 34684	
TITLE	D	51 TITLE		☒ Change ☐ Addition
NAME	MEYERS, RICHARD	52 NAME	FRANCESE, NOEL	
STREET ADDRESS	2815-B SHERBROOKE LN	53 STREET ADDRESS	2821-B SHERBROOKE LANE	
CITY-ST-ZIP	PALM HARBOR FL	54 CITY-ST-ZIP	PALM HARBOR, FL 34684	
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 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)(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: Philip Fulton — 4-13-95 — (813)585-3491
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

PHILIP FULTON

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