

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756051

FILED
Apr 12, 2008
Secretary of State

Entity Name: HIGHLAND LAKES VILLAS ON THE GREEN CONDOMINIUM II ASSOCIATION, INC.

Current Principal Place of Business:

C/O CALIBER CONDO MGT INC
32708 US 19 NORTH
PALM HARBOR, FL 34684 US

New Principal Place of Business:

C/O CALIBER CONDO MGT INC
32712 US 19 NORTH
PALM HARBOR, FL 34684 US

Current Mailing Address:

C/O CALIBER CONDO MGT INC
32708 US 19 NORTH
PALM HARBOR, FL 34684 US

New Mailing Address:

C/O CALIBER CONDO MGT INC
32712 US 19 NORTH
PALM HARBOR, FL 34684 US

FEI Number: 59-2160582

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, MARGORIE J
CALIBER CONDOMINIUM MANGEMENT INC.
32708 US 19 NORTH
PALM HARBOR, FL 34684 US

Name and Address of New Registered Agent:

BROWN, MARGORIE J
CALIBER CONDOMINIUM MANGEMENT INC.
32712 US 19 NORTH
PALM HARBOR, FL 34684 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: MARJORIE J. BROWN

04/12/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DASCHBACH, PAUL
Address: 870C GLENMORE CT
City-St-Zip: PALM HARBOR, FL 34684

Title: VD () Delete
Name: MEROSKI, PAUL
Address: 871-C GLENMORE CT
City-St-Zip: PALM HARBOR, FL 34684

Title: SD () Delete
Name: LARSON, LOIS
Address: 880-B GLENMORE CT
City-St-Zip: PALM HARBOR, FL 34684

Title: TD () Delete
Name: BACKER, GLADYS
Address: 880-D GLENMORE CT
City-St-Zip: PALM HARBOR, FL 34684

Title: VD () Delete
Name: BUCHENALL, JIM
Address: 880-A GLENMORE CT
City-St-Zip: PALM HARBOR, FL 34684

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DINKLE, JOHN
Address: 871D GLENMORE CT
City-St-Zip: PALM HARBOR, FL 34684

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: MARJORIE J. BROWN

AGT

04/12/2008

Electronic Signature of Signing Officer or Director

Date