

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008 8:00 am
Secretary of State

04-29-2008 90080 050 ****61.25

DOCUMENT # 759127

1. Entity Name
HIGHGATE A CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
STERLING MANAGEMENT
1701-B RICKENBACKER DRIVE
SUN CITY CENTER, FL 33573

Mailing Address
STERLING MANAGEMENT
1701-B RICKENBACKER DRIVE
SUN CITY CENTER, FL 33573

40088451



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Su Sterling Management
1904 Clubhouse Drive

#, etc.

01182008

Chg-NP

CR2E037 (12/06)

Cit Sun City Center, FL 33573

e

4. FEI Number
59-2168926

Applied For

Not Applicable

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LAW OFFICES OF JAMES R. DE FURIO, P.A.
201 EAST KENNEDY BOULEVARD
SUITE 1460
TAMPA, FL 33602

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME CORBIN, LINDA ☒ Delete
STREET ADDRESS 2216 HIGHCLERE CIR
CITY-ST-ZIP SUN CITY CENTER, FL 33573

TITLE VPD
NAME GILBRONSON, ALAN ☐ Delete
STREET ADDRESS 2206 HIGHCLERE CIR
CITY-ST-ZIP SUN CITY CENTER, FL 33573

TITLE D
NAME FLORIO, SYLVIA ☒ Delete
STREET ADDRESS 2203 HIGHCLERE CIR
CITY-ST-ZIP SUN CITY CENTER, FL 33573

TITLE SD
NAME DOHERTY, JANET ☒ Delete
STREET ADDRESS 910 HOLFORD CT
CITY-ST-ZIP SUN CITY CENTER, FL 33573

TITLE TD
NAME MCDORMAN, JAMES ☐ Delete
STREET ADDRESS 2214 HIGHCLERE CIR
CITY-ST-ZIP SUN CITY CENTER, FL 33573

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PP Janet Doherty ☐ Change ☒ Addition
NAME 910 Holford Court.
STREET ADDRESS Sun City Center Fl. 33573
CITY-ST-ZIP

TITLE D Frank Maderi ☐ Change ☒ Addition
NAME 2213 Highclere Circle.
STREET ADDRESS Sun City Center Fl. 33573
CITY-ST-ZIP

TITLE SD Elizabeth Lewis ☐ Change ☒ Addition
NAME 2213 Highclere Circle.
STREET ADDRESS Sun City Center Fl. 33573
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Janet Doherty, President

3-14-08

Date

Daytime Phone #

813 633 3558