

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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

04-29-2008 90079 005 ****61.25

DOCUMENT # 759132

1. Entity Name
HIGHGATE F 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

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

3. Mailing Address

Suite, Sterling Management
1904 Clubhouse Drive

etc.

City & Sun City Center, FL 33573

Zip

Country

01182008

Chg-NP

CR2E037 (12/06)

4. FEI Number
59-2251532

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DEFURIO, JAMES R ESQUIRE
201 EAST KENNEDY BLVD SUITE 1460
TAMPA, FL 33602

7. Name and Address of New Registered Agent

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 VPD ☐ Delete
NAME PANCHULA, PAUL
STREET ADDRESS 1002 HAREFIELD CIR
CITY-ST-ZIP SUN CITY CENTER, FL 33573

TITLE TD ☒ Delete
NAME SPONSER, CARLINE
STREET ADDRESS 1111 HAREFIELD CIRCLE
CITY-ST-ZIP SUN CITY CENTER, FL 33573

TITLE D ☐ Delete
NAME MCDANIEL, HELEN
STREET ADDRESS 1013 HAREFIELD CIRCLE
CITY-ST-ZIP SUN CITY CENTER, FL 33573

TITLE SD ☐ Delete
NAME KENNY, BOB
STREET ADDRESS 2045 ACADIA GREENS DR
CITY-ST-ZIP SUN CITY CENTER, FL 33573

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Change ☒ Addition
NAME Wagner, Michael
STREET ADDRESS 1002 Harefield Circle
CITY-ST-ZIP Sun City Center FL 33573

TITLE TD ☐ Change ☒ Addition
NAME Sponser, Caroline
STREET ADDRESS 1111 Harefield Circle
CITY-ST-ZIP Sun City Center FL 33573

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

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

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

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

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:

Michael Wagner

PRES.

3-18-08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #