2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 01, 2007 8:00 am
Secretary of State
02-12-2007 90100 043 ****61.25

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DOCUMENT # N00000003496

1. Entity Name

THE HIGHLANDS AT LAKE CONWAY HOMEOWNER'S ASSOCIATION, INC.

Principal Place of Business	Mailing Address
120 E COLONIAL DR ORLANDO FL 32801	120 E COLONIAL DR ORLANDO FL 32801

1st MOORE CR2E037 (10/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3677689 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

~~PIERCE, DAVID R~~
120 EAST COLONIAL DRIVE
ORLANDO FL 32801

7. Name and Address of New Registered Agent

Name Charles J. Mitchell Jr

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 _____ 1-19-07
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reactivating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2007

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	P CARTER, DARYL M 1715 CONWAY ISLE CIR ORLANDO FL 32809	☒ Delete	Bernard Porchenick 1715 Conway Isle Cir Orlando, FL 32809 Pres.	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	VP DEESE, ALLEN 1545 CONWAY ISLE CIR ORLANDO FL 32809	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	TS Secretary FORD, JIM 1533 CONWAY ISLE CIR ORLANDO FL 32809	☐ Delete	Secretary	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Delete	Director Joe Sterling 1629 Conway Isle Cir' Orlando, FL 32809	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Delete	TS (Treasurer) Jay Calvert 1407 Conway Isle Cir Orlando, FL 32809	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Jim Ford Jim Ford 1/21/07 407 7606153
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #