

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003496

FILED
Mar 13, 2009
Secretary of State

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

Current Principal Place of Business:

GREYSTONE MANAGEMENT
1936 LEE RD SUITE 250
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

GREYSTONE MANAGEMENT
1936 LEE RD SUITE 250
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: 59-3677689

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARMSTRONG, JANICE C
GREYSTONE MANAGEMENT
1936 LEE RD SUITE 250
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PORCHENICK, BERNARD
Address: 1715 CONWAY ISLE CIR
City-St-Zip: ORLANDO, FL 32809

Title: VP () Delete
Name: DRAKE, SUSAN
Address: 1425 CONWAY ISLE CIRCLE
City-St-Zip: ORLANDO, FL 32809

Title: S () Delete
Name: FORD, JIM
Address: 1533 CONWAY ISLE CIR
City-St-Zip: ORLANDO, FL 32809

Title: D () Delete
Name: STERLING, JOE
Address: 1629 CONWAY ISLE CIR
City-St-Zip: ORLANDO, FL 32809

Title: TS () Delete
Name: CALVERT, JAY
Address: 1407 CONWAY ISLE CIR
City-St-Zip: ORLANDO, FL 32809

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: JAMES, FORD
Address: 1533 CONWAY ISLE CIR
City-St-Zip: ORLANDO, FL 32809

Title: S (X) Change () Addition
Name: DRAKE, SUE
Address: 1425 CONWAY ISLE CIRCLE
City-St-Zip: ORLANDO, FL 32809

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: BERNARD PORCHENICK

PRES

03/13/2009

Electronic Signature of Signing Officer or Director

Date