

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003496

FILED  
Feb 28, 2011  
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:** 59-6377689

**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: VP  
Name: HOGUE, MARY  
Address: 1622 CONWAY ISLE CIRCLE  
City-St-Zip: ORLANDO, FL 32809

Title: P  
Name: JAMES, FORD  
Address: 1533 CONWAY ISLE CIR  
City-St-Zip: ORLANDO, FL 32809

Title: S  
Name: DRAKE, SUE  
Address: 1425 CONWAY ISLE CIRCLE  
City-St-Zip: ORLANDO, FL 32809

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

Title: T  
Name: CALVERT, JAY  
Address: 1407 CONWAY ISLE CIR  
City-St-Zip: ORLANDO, FL 32809

I hereby 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 all other like empowered.

SIGNATURE: JIM FORD

P

02/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date