


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2008 8:00 am
Secretary of State

02-25-2008 90049 015 ****61.25

DOCUMENT # N01000001859					
1. Entity Name HIGHLAND FAIRWAYS RESIDENT ACCOUNT, INC.					
Principal Place of Business 3222 HIGHLAND FAIRWAYS BLVD LAKELAND, FL 33810			Mailing Address 3222 HIGHLAND FAIRWAYS BLVD LAKELAND, FL 33810		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-3709703	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
-- 6. Name and Address of Current Registered Agent DEFURIO, JAMES R 201 E KENNEDY BLVD SUITE 1460 TAMPA, FL 33602-7800				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	T	<input checked="" type="checkbox"/> Delete	TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SIMON, EARL		NAME	Verbeke, Judith	
STREET ADDRESS	3653 WILDCAT RUN		STREET ADDRESS	1939 Prairie Dunes Cr. N.	
CITY-ST-ZIP	LAKELAND, FL 33810		CITY-ST-ZIP	Lakeland, FL 33810	
TITLE	T	<input type="checkbox"/> Delete	TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SMUCKER, LARRY		NAME	Hand, Billy	
STREET ADDRESS	3728 WILDCAT RUN		STREET ADDRESS	1821 Prairie Dunes Cr. N.	
CITY-ST-ZIP	LAKELAND, FL 33810		CITY-ST-ZIP	Lakeland, FL 33810	
TITLE	CT	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUSCHER, BERNARD C		NAME		
STREET ADDRESS	3828 WILDCAT RUN		STREET ADDRESS		
CITY-ST-ZIP	LAKELAND, FL 33810		CITY-ST-ZIP		
TITLE	ST	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHAFER, MILDRED C		NAME		
STREET ADDRESS	3212 PRAIRIE DUNES CIRCLE W		STREET ADDRESS		
CITY-ST-ZIP	LAKELAND, FL 33810		CITY-ST-ZIP		
TITLE	TT	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RAILA, DORIS L		NAME		
STREET ADDRESS	3231 BEAR CREEK LANE		STREET ADDRESS		
CITY-ST-ZIP	LAKELAND, FL 33810		CITY-ST-ZIP		
TITLE	ATT	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILLER, REHA		NAME		
STREET ADDRESS	3121 SAND TRAP CT.		STREET ADDRESS		
CITY-ST-ZIP	LAKELAND, FL 33810		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: <u>B. Busch</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
<small>Date Daytime Phone #</small>					