

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01828

FILED
Apr 13, 2005
Secretary of State

Entity Name: HIGHLAND PROFESSIONAL CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O FRANK WIGLE
1201 S. HIGHLAND AVE., S-3
CLEARWATER, FL 33756 US

New Principal Place of Business:

Current Mailing Address:

C/O FRANK WIGLE
1201 S. HIGHLAND AVE., S-3
CLEARWATER, FL 33756 US

New Mailing Address:

FEI Number: 59-2483289

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WIGLE, FRANK T
1201 S. HIGHLAND AVE
STE 10
CLEARWATER, FL 33756 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: ST () Delete
Name: WIGLE, JUNE I
Address: 1201 S. HIGHLAND AV #10
City-St-Zip: CLEARWATER, FL 33756

Title: V () Delete
Name: WAINSCOTT, FRANK
Address: 1201 S HIGHLAND AVE, S2
City-St-Zip: CLEARWATER, FL 33756

Title: P () Delete
Name: WIGLE, FRANK T
Address: 1201 S HIGHLAND AVE STE 10
City-St-Zip: CLEARWATER, FL 33756

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 for the exemption stated in Section 119.07(3)(i), 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: FRANK T. WIGLE

PRES

04/13/2005

Electronic Signature of Signing Officer or Director

Date