

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001397

FILED
Aug 21, 2011
Secretary of State

Entity Name: HIGHLAND HARBOR HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

6039 CYPRESS GARDENS BLVD. #312
WINTER HAVEN, FL 33884

New Principal Place of Business:

Current Mailing Address:

6039 CYPRESS GARDENS BLVD. #312
WINTER HAVEN, FL 33884

New Mailing Address:

6039 CYPRESS GARDENS BLVD., #312
WINTER HAVEN, FL 33884

FEI Number: 01-0658397

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, CHRISTIE
5824 DRIFTWOOD DR
WINTER HAVEN, FL 33884 US

Name and Address of New Registered Agent:

KALLISTER, HOLLY
5854 BREAKWATER DRIVE
WINTER HAVEN, FL 33884 US

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: HOLLY KALLISTER

08/21/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: KALLISTER, HOLLY
Address: 5854 BREAKWATER DRIVE
City-St-Zip: WINTER HAVEN, FL 33884

Title: VP
Name: CAMPBELL, JIM
Address: 5844 BREAKWATER DRIVE
City-St-Zip: WINTER HAVEN, FL 33884

Title: T
Name: JONES, LINDA
Address: 5816 DRIFTWOOD DR
City-St-Zip: WINTER HAVEN, FL 33884

Title: S
Name: HUTTON, STEPHIE
Address: 5819 DRIFTWOOD DRIVE
City-St-Zip: WINTER HAVEN, FL 33884

Title: D
Name: RICHBURG, FAY
Address: 5836 BREAKWATER DRIVE
City-St-Zip: WINTER HAVEN, FL 33884

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: HOLLY KALLISTER

PRES

08/21/2011

Electronic Signature of Signing Officer or Director

Date