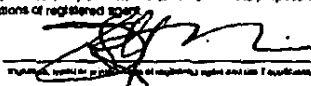
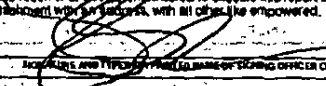


FILED
Jun 18, 2003 8:00 am
Secretary of State

05-05-2003 91801 034 ****61.25

2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

55048834

DOCUMENT # N02000001505	
1. Entity Name HIGHLAND RIDGE HOMEOWNERS' ASSOCIATION OF MANATEE COUNTY, INC.	
Principal Place of Business 1580 FRUITVILLE ROAD SUITE 102 SARASOTA, FL 34236	Mailing Address 1680 FRUITVILLE ROAD SUITE 102 SARASOTA, FL 34236
2. Principal Place of Business	3. Mailing Address
Subs. Apt. #, etc.	Subs. Apt. #, etc.
City & State	City & State
Zip	Country
4. FEI Number 04-3458392	
5. Certificate of Status Desired ☐ \$3.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LEVIN, JEROME S LEVIN TANNENBAUM WOLFF ET AL 1680 FRUITVILLE ROAD SUITE 102 SARASOTA, FL 34236	
7. Name and Address of New Registered Agent Name Jack Hanson Street Address (P.O. Box Number is Not Acceptable) 3974 Tampa Road Ste B City Oldsmar FL Zip Code 34667	
A. 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 4/25/03	
9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fee	
10. OFFICERS AND DIRECTORS	
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP
Robert Koontz D 1680 Fruitville Rd Sarasota FL 34236	
Brian Koontz D 1680 Fruitville Rd Sarasota FL 34236	
Jerome Levin D 1680 Fruitville Rd Sarasota FL 34236	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(5)(X), 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 person 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 hereto, with all other like empowered.	
SIGNATURE:  DATE 4/25/03	