

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2006 8:00 am
Secretary of State

03-23-2006 90001 035 ****61.25

DOCUMENT # N02000001811

1. Entity Name
**HIGHLANDS CROSSING SUBDIVISION, PHASE 1,
PROPERTY OWNERS ASSOCIATION, INC.**



Principal Place of Business
**PO BOX 159
HIGHLAND CITY, FL 33846**

Mailing Address
**PO BOX 159
HIGHLAND CITY, FL 33846**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03192006 Chg-NP CR2E037 (11/05)

4. FEI Number
03-0392121

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**REGAN, BILLY CHARLES
6243 HIGHLAND RISE DRIVE
LAKELAND, FL 33813**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

7. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	P/D	☒ Delete
NAME	LAMBERT, DAVID	
STREET ADDRESS	6275 HIGHLAND RISE DRIVE	
CITY-ST-ZIP	LAKELAND, FL 33813	
TITLE	V/D	☒ Delete
NAME	MAHONEY, TERRI	
STREET ADDRESS	3629 HIGHLAND WAY	
CITY-ST-ZIP	LAKELAND, FL 33813	
TITLE	T/D	☐ Delete
NAME	REGAN, BILLY	
STREET ADDRESS	6243 HIGHLAND RISE DRIVE	
CITY-ST-ZIP	LAKELAND, FL 33813	
TITLE	S/D	☒ Delete
NAME	PARRISH, JUNE	
STREET ADDRESS	3642 WELCH WAY	
CITY-ST-ZIP	LAKELAND, FL 33813	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	☒ Change ☐ Addition
NAME	Terri Mahoney	
STREET ADDRESS	3629 Welch Way	
CITY-ST-ZIP	Lakeland FL 33813	
TITLE	S	☒ Change ☐ Addition
NAME	Lydia Mc Connell	
STREET ADDRESS	6251 Highland Rise Dr	
CITY-ST-ZIP	Lakeland FL 33813	
TITLE	D	☒ Change ☐ Addition
NAME	Steve Kraemer	
STREET ADDRESS	6358 Oak Point	
CITY-ST-ZIP	Lakeland FL 33813	
TITLE	D	☒ Change ☐ Addition
NAME	John Killam	
STREET ADDRESS	6279 Highland Rise Dr	
CITY-ST-ZIP	Lakeland FL 33813	
TITLE	D	☒ Change ☐ Addition
NAME	Gordon Mc Connell	
STREET ADDRESS	6251 Highland Rise Dr	
CITY-ST-ZIP	Lakeland FL 33813	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
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

Billy Regan