2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

May 02, 2006 8:00 am Secretary of State DOCUMENT # N02000005924 05-02-2006 90189 019 ****61.25 HIGHLAND GROVES HOMEOWNERS ASSOCIATION. INC. Principal Place of Business Mailing Address 1135 EAST AVE 1135 EAST AVE CLERMONT, FL 34711 CLERMONT, FL 34711 2. Principal Place of Business 3. Mailing Address 10325 MASON LOOP 10325 MASON LOOP Suite, Apt. #, etc. Suite, Apt. #, etc. 04282006 Cha-NP CR2E037 (4/06) City & State City & State Applied For 4. FEI Number 03-0476197 CLERMONT CLERMONT FL Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired П usA 34711 34711 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BERNARD BAJARDI LADD, DALE J Street Address (P.O. Box Number is Not Acceptable) 1135 EAST AVE CLERMONT, FL 34711 Zip Code **ろ**Ҷヿゖ CLERMONT 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 agen BERNARD BAJARDI SIGNATURE (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be \Box Due by May 1, 2006 Trust Fund Contribution. Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11 TITLE TITLE **X** Delete BERNARD BAJARDI 10325 MASON LOOP NAME LADD, DALE J NAME STREET ADDRESS 1135 EAST AVE STREET ADDRESS FL 34711 CITY-ST-ZIP CLERMONT, FL 34711 CLERMONT City-St-Zie ND D Change TITLE Delete TITLE ☐ Addition MITZLE YOUNG WELL LANE LADD, DARRYL A NAME 1135 EAST AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CLERMONT FL 34711 CLERMONT, FL 34711 CITY-ST-7tP TITLE **D**elete TITLE Change ☐ Addition NAME LADD, NANCY NAME KENNETH GRIEB STREET ADDRESS 1135 EAST AVE. 10232 DOVEHILL LANE STREET ADDRESS CITY - ST- 7IP CLERMONT, FL 34711 CITY-ST-ZIP CLERMONT FL 34711 TITLE T D Delete TITLE ☐ Change Addition NAME NAME LYDÍA RIVERA STREET ADDRESS 10026 DOVEHILL LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP CLERMONT FL 34711 TITLE Delete TITLE Change Addition TEENA SLINGLUFF NAME NAME 10200 MASON LOOP STREET ADDRESS STREET ADDRESS CITY-ST-ZIF FL 34711 CLERMONT CITY-ST-ZIP TITLE ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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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.

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18325 MRSON LOPP, HERDENST, FL 18/0