## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000010047

FILED Mar 04, 2010 Secretary of State

Entity Name: HIGHCROFT POINTE TOWNHOME OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2180 W. ST RD. 434 2180 WEST SR 434 SUITE 5000 SUITE 5000

LONGWOOD, FL 327795044 LONGWOOD, FL 327795044

Current Mailing Address: New Mailing Address:

2180 W. ST RD. 434 2180 WEST SR 434

SUITE 5000 SUITE 5000

LONGWOOD, FL 327795044 LONGWOOD, FL 327795044

FEI Number: 20-0448879 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HART, JAMES W JR SENTRY MANAGEMENT INC 2180 W SR 434 SUITE 5000 LONGWOOD, FL 32779 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PD

Name: HEINKEL, RICHARD
Address: 421 BLACK KNIGHT WAY
City-St-Zip: LONGWOOD, FL 32779

Title: VPD

Name: VOORHEES, SUE
Address: 529 SHINING ARMOR LN
City-St-Zip: LONGWOOD, FL 32779

Title: SD

Name: JOHNSTON, LINDSAY JR Address: 473 BLACK KNIGHT WAY City-St-Zip: LONGWOOD, FL 32779

Title: TD

Name: MACKENZIE, MARGO
Address: 557 SHINING ARMOR LN
City-St-Zip: LONGWOOD, FL 32779

Title: D

Name: WHITELOCKE, JEAN
Address: 501 SHINING ARMOR LN
City-St-Zip: LONGWOOD, FL 32779

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: RICHARD HEINKEL PD 03/04/2010