

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 19, 2007 8:00 am
Secretary of State

07-19-2007 90024 002 ****61.25

DOCUMENT # N04000002664 1. Entity Name HIGH GROVE OF LAKE COUNTY HOMEOWNERS ASSOCIATION, INC.			
Principal Place of Business 5401 S KIRKMAN RD STE 450 ORLANDO, FL 32819		Mailing Address 1330 PALMETTO AVENUE WINTER PARK, FL 32789	
2. Principal Place of Business - No P.O. Box # 1801 Cook Avenue		3. Mailing Address 1801 Cook Ave	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State Orlando, Florida		City & State Orlando, Florida	
Zip 32806		Zip 32806	
Country U.S.		Country U.S.	
6. Name and Address of Current Registered Agent COMMUNITY MANAGEMENT PROFESSIONALS, INC. 5401 S KIRKMAN RD SUITE 450 ORLANDO, FL 32819		7. Name and Address of New Registered Agent Name Don Asler & Associates Street Address (P.O. Box Number is Not Acceptable) 1801 Cook Avenue City Orlando FL Zip Code 32806	
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 <u><i>[Signature]</i></u> (NOTE: Registered Agent signature required when reinstating) DATE _____			
Filing Fee is \$61.25 Due by September 14, 2007		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	NAME	Delete ☐	
	P ARCHER, LOUIS		
STREET ADDRESS	125 EDGEWATER BRANCH DR		
CITY-ST-ZIP	JACKSONVILLE, FL 32259		
TITLE	VP	Delete ☒	
NAME	POWELL, GEORGE		
STREET ADDRESS	11 BROOM CLOSET HORP MARIOT		
CITY-ST-ZIP	NORWICH ENGLAND, UK		
TITLE	S	Delete ☒	
NAME	DUMBILL, VIVIEN		
STREET ADDRESS	65 PARK LANE WESTON TRENT		
CITY-ST-ZIP	DERBYSHIRE, ENGLAND, UK		
TITLE	T	Delete ☐	
NAME	POP, LYNNE		
STREET ADDRESS	22 DERBY RD		
CITY-ST-ZIP	MIDDLESEX, ENGLAND, UK		
TITLE	D	Delete ☐	
NAME	GILBERT, SHIRLEY		
STREET ADDRESS	3 ROLFE DR		
CITY-ST-ZIP	BURGESS HILL W. SUSSEX, UK		
TITLE		Delete ☐	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	NAME	Change ☒ Addition ☐	
	VP		
STREET ADDRESS	Archer, Louis		
CITY-ST-ZIP	125 Edgewater Branch Drive Jacksonville, FL 32259		
TITLE	President	Change ☐ Addition ☐	
NAME	Sharon Dyon		
STREET ADDRESS	215 Summer Place Loop		
CITY-ST-ZIP	Clermont, FL 34714		
TITLE	D	Change ☐ Addition ☒	
NAME	Christopher Atkins		
STREET ADDRESS	196 North Avenue		
CITY-ST-ZIP	NOTTS NG 24 370 United Kingdom		
TITLE	Secretary	Change ☒ Addition ☐	
NAME	Gilbert, Shirley		
STREET ADDRESS	3 Rolfe Dr		
CITY-ST-ZIP	Burgess Hill N. Sussex, UK		
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: <u><i>Sharon Dyon</i></u> 7/10/07 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #			

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07062007 Chg-NP CR2E037 (12/06)

4. FEI Number
55-0861690 Applied For ☐ Not Applicable ☐

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

[Handwritten signature]