

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 25, 2008 8:00 am**  
**Secretary of State**

04-25-2008 90134 027 \*\*\*\*61.25

**DOCUMENT # N06611**

1. Entity Name  
HIGHLAND PLACE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business  
% MAXIMUM MANAGEMENT  
7301 W. SUNRISE BLVD  
PLANTATION, FL 33313 US

Mailing Address  
% MAXIMUM MANAGEMENT  
7301 W. SUNRISE BLVD  
PLANTATION, FL 33313 US

40082248



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02122008 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number  
59-2596225

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HOBART, ROBERT  
7301 W. SUNRISE BLVD  
PLANTATION, FL 33313

Name

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

City

FL

Zip Code

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 transferring)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2008**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME MCCLUSKEY, EDWARD ☐ Delete  
STREET ADDRESS 11717 HIGHLAND PLACE  
CITY-STATE-ZIP CORAL SPRINGS, FL 33071

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE VD  
NAME RUGGIERO, JOSEPH ☐ Delete  
STREET ADDRESS 11732 HIGHLAND PLACE  
CITY-STATE-ZIP CORAL SPRINGS, FL 33071

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE SD  
NAME GOMM, JACK ☒ Delete  
STREET ADDRESS 11713 HIGHLAND PLACE  
CITY-STATE-ZIP CORAL SPRINGS, FL 33071

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE VD  
NAME FOGLIA, JOSEPH ☐ Delete  
STREET ADDRESS 11818 HIGHLAND PLACE  
CITY-STATE-ZIP CORAL SPRINGS, FL 33071

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE D  
NAME MAUREEN, CAMPBELL ☐ Delete  
STREET ADDRESS 11705 HIGHLAND PLACE  
CITY-STATE-ZIP CORAL SPRINGS, FL 33071

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE D  
NAME HOFER, JOSEPH ☐ Delete  
STREET ADDRESS 11823 HIGHLAND PLACE  
CITY-STATE-ZIP CORAL SPRINGS, FL 33071

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3.1.08

Date

954.752 7106

Daytime Phone #