

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jun 23, 2009
Secretary of State**

DOCUMENT# N08000001293

Entity Name: HIGHLANDS LANDING PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

5529 US HWY 98 NORTH
LAKE LAND, FL 33809

New Principal Place of Business:

Current Mailing Address:

5529 US HWY 98 NORTH
LAKE LAND, FL 33809

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SAUNDERS, JOE L.
5529 US HWY 98 NORTH
LAKE LAND, FL 33809 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SAUNDERS, JOE L.
Address: 5529 US HWY 98 NORTH
City-St-Zip: LAKE LAND, FL 33809

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Delete
Name: SAUNDERS, DEAN P.
Address: 5120 S. LAKE LAND DR.
City-St-Zip: LAKE LAND, FL 33811

Title: D (X) Change () Addition
Name: SAUNDERS, RICHARD
Address: 5529 US HWY 98 N
City-St-Zip: LAKE LAND, FL 33809

Title: D () Delete
Name: SAUNDERS, LEE
Address: 5529 US HWY 98 NORTH
City-St-Zip: LAKE LAND, FL 33809

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JOE L SAUNDERS

D

06/23/2009

Electronic Signature of Signing Officer or Director

_____ Date