

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21017

FILED
Feb 26, 2009
Secretary of State

Entity Name: HIGH HILLS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

401 E. VIRGINIA STREET
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

401 E. VIRGINIA STREET
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 20-3919194

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEWIS, BRADFORD
401 E. VIRGINIA STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

LEWIS, BRADFORD R
401 E. VIRGINIA STREET
TALLAHASSEE, FL 32301 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: BRADFORD R. LEWIS

02/26/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LEWIS, BRADFORD
Address: 401 E. VIRGINIA STREET
City-St-Zip: TALLAHASSEE, FL 32301

Title: SD () Delete
Name: GAHAFFER, CONNIE
Address: 15111 HIGH HILLS CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

Title: TD () Delete
Name: VICKERS, STELLA
Address: 14044 HIGH HILLS CIRCLE
City-St-Zip: TALLAHASSEE, FL 32314

Title: VD () Delete
Name: GAHAFFER, CONNIE
Address: 15111 HIGH HILLS CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: BRADFORD R LEWIS

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02/26/2009

Electronic Signature of Signing Officer or Director

Date