


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2005 8:00 am
Secretary of State

04-04-2005 90079 023 ****61.25

DOCUMENT # N23639		
1. Entity Name HIGHLAND LAKES/BRADENTON OWNERS ASSOCIATION, INC.		

Principal Place of Business C/O AMI 9031 TOWN CENTER PKWY BRADENTON, FL 34202 US	Mailing Address C/O AMI 9031 TOWN CENTER PKWY BRADENTON, FL 34202 US
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40046170



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

02012005 Chg-NP CR2E037 (10/03)

4. FEI Number 59-3075216	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
ADVANCED MGMT OF SOUTHWEST FL INC. 9031 TOWN CENTER PKWY BRADENTON, FL 34202	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

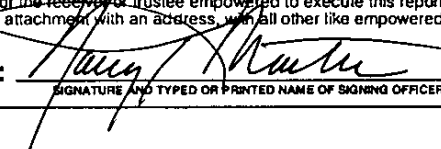
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE	(NOTE: Registered Agent signature required when reappointing)	DATE
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Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PD <input type="checkbox"/> Delete	TITLE	President <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHWIENING, PEGGY	NAME	Margaret V. Schwiening
STREET ADDRESS	4314 TURNBERRY CT	STREET ADDRESS	4314 Turnberry Ct Bradenton FL
CITY-ST-ZIP	BRADENTON, FL 34210	CITY-ST-ZIP	34210
TITLE	D <input type="checkbox"/> Delete	TITLE	Director <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BILL, FRANK	NAME	Bill Frank
STREET ADDRESS	4730 DUNDEE DR. W	STREET ADDRESS	4730 Dundee Dr. W.
CITY-ST-ZIP	BRADENTON, FL 34210	CITY-ST-ZIP	Bradenton, FL 34210
TITLE	VPD <input type="checkbox"/> Delete	TITLE	Vice President <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHARLES, BUNTON	NAME	Charles D. Bunton
STREET ADDRESS	4826 DUNDEE DR. W.	STREET ADDRESS	4826 Dundee Bradenton, FL
CITY-ST-ZIP	BRADENTON, FL 34210	CITY-ST-ZIP	34210
TITLE	SD <input type="checkbox"/> Delete	TITLE	Secretary <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MINTON, WENDY	NAME	Wendy Minton
STREET ADDRESS	4805 MONTROSE DR W	STREET ADDRESS	4805 Montrose Dr.
CITY-ST-ZIP	BRADENTON, FL 34210	CITY-ST-ZIP	Bradenton, FL 34210
TITLE	T <input type="checkbox"/> Delete	TITLE	TREASURER <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARTIN, NANCY	NAME	NANCY K. MARTIN
STREET ADDRESS	4717 DUNDEE DR W	STREET ADDRESS	4717 DUNDEE DR. W.
CITY-ST-ZIP	BRADENTON, FL 34210	CITY-ST-ZIP	BRADENTON, FL 34210
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: 	Date: 3/21/05	Daytime Phone #: 941 359-1134
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