2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23639

FILED May 01, 2009 Secretary of State

Entity Name: HIGHLAND LAKES/BRADENTON OWNERS ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place of Business:	
C/O AMI 9031 TOWN CENTER PKWY BRADENTON, FL 34202 US			
Current Mailing Address:		New Mailing Address:	
C/O AMI 9031 TOWN CENTER PKWY BRADENTON, FL 34202 US			
FEI Number: 59-3075216 FEI Number Applied For () 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:			
ADVANCED MGMT OF SOUTHWEST FL INC. 9031 TOWN CENTER PKWY BRADENTON, FL 34202 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: Name: Address: City-St-Zip:	D () Delete GUSIE, BARBARA 4709 MONTROSE DR W BRADENTON, FL 34210	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	P () Delete VANDERKLOK, ROY 4317 MUIRFIELD DRIVE W. BRADENTON, FL 34210	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	V () Delete CHARLES, BUNTON 4826 DUNDEE DR. W. BRADENTON, FL 34210	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	S () Delete MINTON, WENDY 4805 MONTROSE DR W BRADENTON, FL 34210	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	TD () Delete HOWELL, JOHN 4421-GALLOWAY BLVD. BRADENTON, FL 34210	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	AS () Delete WILSON, DOUGLAS E 9031 TOWN CENTER PKWY BRADENTON, FL 34202	Title: Name: Address: City-St-Zip:	()Change ()Addition
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: DOUGLAS E WILSON AS 05/01/2009