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Jun 16 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N26966 (4)
 1. Corporation Name
HIGH VISTA PROPERTY OWNERS' ASSOCIATION, INC.



Principal Place of Business 1957 HIGH VISTA DRIVE P.O. BOX 5412 LAKELAND FL 33807-2412 US	Mailing Address 1957 HIGH VISTA DRIVE P.O. BOX 5412 LAKELAND FL 33807-5412 US
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21 2. Principal Place of Business Suite, Apt. #, etc. 22 City & State 23 Zip Country	26 2a. Mailing Address Suite, Apt. #, etc. 27 City & State 28 Zip Country
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3 Date Incorporated or Qualified 06/15/1988	3a Date of Last Report 02/23/1996
4 FEI Number 59-2894237	Applied For Not Applicable
5 Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6 Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8 This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9 Name and Address of Current Registered Agent BETTS, STEVEN A 1957 HIGH VISTA DRIVE LAKELAND FL 33813

10 Name and Address of New Registered Agent 81 Name TIM MILCICH 82 Street Address (P.O. Box Number is Not Acceptable) 1936 VISTA VIEW DRIVE 83 84 City LAKELAND FL 85 Zip Code 33813
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Timothy P. Milcich* (NOTE: Registered Agent signature required when reinstating) *4/25/97*

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD BETTS, STEVEN A 1957 HIGH VISTA DRIVE LAKELAND FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD PRINCE, ROBERT M. 1970 HIGH VISTA DR. LAKELAND FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD PALM, EUGENE 1988 VISTA VIEW DRIVE LAKELAND FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TREAS MILCICH, TIM 1936 VISTA VIEW DR. LAKELAND FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	UB ROX JONES 1933 HIGH VISTA DRIVE LAKELAND, FL 33813
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	SEC T JOHN MARLINS 1928 VISTA VIEW DR LAKELAND, FL 33813
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Timothy P. Milcich* *TREASURER* *4/25/97* *941 687-2125*

CR2E037 (9/96)