## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37577

FILED Feb 19, 2009 Secretary of State

Entity Name: CLUBHOUSE VILLAGE OF HIGHLAND LAKES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:** 

New Principal Place of Business:

C/O INFINITI PROPERTY AMNAGEMENT 1301 SEMINOLE BLVD LARGO, FL 33770

C/O QUALIFIED PROPERTY AMNAGEMENT 1301 SEMINOLE BLVD, STE. 110

LARGO, FL 33770

**Current Mailing Address:** 

New Mailing Address:

C/O INFINITI PROPERTY AMNAGEMENT 1301 SEMINOLE BLVD 110 LARGO, F 33770

C/O QUALIFIED PROPERTY AMNAGEMENT 1301 SEMINOLE BLVD, STE 110

LARGO, FL 33770

FEI Number: 59-3030838

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

INFINITI PROPERTY MANAGEMENT INC 1301 SEMINOLE BLVD SUITE 110 LARGO, FL 33770

QUALIFIED PROPERTY MANAGEMENT INC 1301 SEMINOLE BLVD SUITE 110 LARGO, FL 33770 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: QUALIFIED PROPERTY MGMT

02/19/2009

Electronic Signature of Registered Agent

FEI Number Applied For ( )

Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition

() Delete

CONNELLY, PAT Name:

1600 HIGHLAND CLUB COURT Address:

City-St-Zip: PALM HARBOR, FL 34684

Title: SD ( ) Delete SABELLA, FRANK Name:

Address: 1802 HIGHLAND CLUB LANE

City-St-Zip: PALM HARBOR, FL 34684

Title: () Delete LENTRICCHIA, DANTE Name:

1804 HIGHLAND CLUB CT Address: City-St-Zip: PALM HARBOR, FL 34684 Name:

Address: City-St-Zip:

Title: (X) Change ( ) Addition

Name: SABELLA, FRANK

Address: 1802 HIGHLAND CLUB LANE City-St-Zip: PALM HARBOR, FL 34684

Title: (X) Change ( ) Addition

LENTRICCHIA, DANTE Name: 1804 HIGHLAND CLUB CT Address: City-St-Zip: PALM HARBOR, FL 34684

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: PAT CONNELLY PD 02/19/2009