2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2011
Secretary of State

DOCUMENT# N39833

Entity Name: HIGHLAND MEDICAL OFFICE COMPLEX PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

830 MEDICAL CT E
INVERNESS, FL 34452

New Principal Place of Business:

Current Mailing Address:

830 MEDICAL CT E
INVERNESS, FL 34452

New Mailing Address:

FEI Number: 59-3055822 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EDEN, JOHN H. IV PA
52 U.S. HWY 41 SOUTH
INVERNESS, FL 34450 US

Name and Address of New Registered Agent:

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:

Title: SDT
Name: MONTGOMERY, DAN
Address: 830 MEDICAL CT E
City-St-Zip: INVERNESS, FL 34452

I hereby 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 all other like empowered.

SIGNATURE: DAN MONTGOMERY DR 01/05/2011

Electronic Signature of Signing Officer or Director Date