

**FILE NOW: FILING FEE IS \$61.25**

APPROVED  
AND  
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97 MAY -1 PM 1:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1997**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # N93000002434 (9)**

1. Corporation Name

**THE HIGHLANDS HOMEOWNERS' ASSOCIATION OF TALLAHASSEE, INC.**



Principal Place of Business

Mailing Address

**431 WAVERLY RD.  
TALLAHASSEE FL 32312  
US**

**431 WAVERLY RD.  
TALLAHASSEE FL 32312-2856  
US**

3. Date Incorporated or Qualified  
**05/28/1993**

3a. Date of Last Report  
**05/01/1996**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

4. FEI Number  
**59-3183708**

Applied For  
Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

**\$5.00** May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ISAACS, DAN LEE  
431 WAVERLY RD.  
TALLAHASSEE FL 32312**

81 Name

82 Street Address (P.O. Box Number Not Applicable)  
**4000 N 154714 --- 0**

83 **05/02/97-01153-003  
\*\*\*\*\*61.25 \*\*\*\*\*61.25**

84 City

**FL**

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  DELETE  
NAME **Pres FUREY, BOB**  
STREET ADDRESS **5349 TEWKESBURY TRACE**  
CITY-ST-ZIP **TALLAHASSEE FL**

11 TITLE  Change  Addition  
12 NAME  
13 STREET ADDRESS  
14 CITY-ST-ZIP

TITLE  DELETE  
NAME **D HENSEL, LUAIN**  
STREET ADDRESS **5373 APPLIEDORE LANE**  
CITY-ST-ZIP **TALLAHASSEE FL**

21 TITLE  Change  Addition  
22 NAME **Sec D Dave Harvey**  
23 STREET ADDRESS **5351 Tewkesbury Trace**  
24 CITY-ST-ZIP **Tallahassee, FL 32308**

TITLE  DELETE  
NAME **D LAURIENZO, TONY**  
STREET ADDRESS **5373 TEWKESBURY TRACE**  
CITY-ST-ZIP **TALLAHASSEE FL**

31 TITLE  Change  Addition  
32 NAME **Treas D Jim Young**  
33 STREET ADDRESS **5308 Paddington Drive**  
34 CITY-ST-ZIP **Tallahassee, FL 32308**

TITLE  DELETE  
NAME **PD MAY, BILL**  
STREET ADDRESS **5391 APPLIEDORE LANE**  
CITY-ST-ZIP **TALLAHASSEE FL**

41 TITLE  Change  Addition  
42 NAME **Dir John Kvartek**  
43 STREET ADDRESS **5373 Paddington Drive**  
44 CITY-ST-ZIP **Tallahassee, FL 32308**

TITLE  DELETE  
NAME **Vice Pres ORTGIES, BEN**  
STREET ADDRESS **5344 TEWKESBURY TRACE**  
CITY-ST-ZIP **TALLAHASSEE FL**

51 TITLE  Change  Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

61 TITLE  Change  Addition  
62 NAME **D. Alan**  
63 STREET ADDRESS  
64 CITY-ST-ZIP **5/1/97**

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.

CR2E037 (9/96)