

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 27, 2006 8:00 am**  
**Secretary of State**

03-27-2006 90254 017 \*\*\*\*61.25

**DOCUMENT # N94000006263**

1. Entity Name

HIGHLAND FOREST ASSOCIATION, INC.



Principal Place of Business

1324 WILSHIRE CT S  
JACKSONVILLE FL 32259  
US

Mailing Address

P O BOX 600056  
JACKSONVILLE FL 32260-0056  
US



2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3306764

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

1st MOORE

CR2E037 (10/05)

6. Name and Address of Current Registered Agent

OSWANDEL, KEVIN  
1324 WILSHIRE CT S  
JACKSONVILLE FL 32259

7. Name and Address of New Registered Agent

Name

RICK JOHNSON

Street Address (P.O. Box Number is Not Acceptable)

1544 HIGHLAND FOREST DR

City

JACKSONVILLE

FL

Zip Code

32259

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when re-registering)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE D ☒ Delete  
NAME OSWANDEL, KEVIN  
STREET ADDRESS 1324 WILSHIRE CT S  
CITY-ST-ZIP JACKSONVILLE FL 32259

TITLE P ☐ Delete  
NAME JOHNSON, RICK  
STREET ADDRESS HIGHLAND FOREST DRIVE  
CITY-ST-ZIP JACKSONVILLE FL 32259

TITLE S ☒ Delete  
NAME EDWARDS, LISA  
STREET ADDRESS 1332 WILSHIRE CT.  
CITY-ST-ZIP JACKSONVILLE FL 32259

TITLE SD ☐ Delete  
NAME PAT, GILFORD  
STREET ADDRESS 1529 HIGHLAND FOREST DR  
CITY-ST-ZIP JACKSONVILLE FL 32259

TITLE VP ☒ Delete  
NAME BRACMAN, MARK  
STREET ADDRESS 1304 WILSHIRE CT.  
CITY-ST-ZIP JACKSONVILLE FL 32259

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE SECRETARY ☐ Change ☒ Addition  
NAME LYNN OSWANDEL  
STREET ADDRESS 1324 WILSHIRE CT S.  
CITY-ST-ZIP JACKSONVILLE, FL 32259

TITLE At Large ☐ Change ☒ Addition  
NAME Walt Brown  
STREET ADDRESS 1532 Highland Forest Dr.  
CITY-ST-ZIP Jacksonville, FL 32259

TITLE VICE PRESIDENT ☐ Change ☒ Addition  
NAME FRANK BERLINGO  
STREET ADDRESS 1321 WILSHIRE CT. S  
CITY-ST-ZIP JACKSONVILLE, FL 32259

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Rick Johnson

3/11/06 904-358-6394