## 2000-NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## ANNUAL REPORT FILED Feb 15, 2008 08:00 AN **DOCUMENT # N95000005639 Secretary of State** 1. Entity Name **GLYNWOOD HIGHLANDS HOMEOWNERS** ASSOCIATION, INC. Principal Place of Business Mailing Address PO BOX 995 PO BOX 995 DUNEDIN, FL 34697 DUNEDIN, FL 34697 02122008 No Chg-NP CR2E037 (4/06) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3425071 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LOESCH, THOMAS J DO NOT WRITE 1633 HAYWICK TERR DUNEDIN, FL 34698 IN THIS SPACE 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 reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Filing Fee is \$61.25 Trust Fund Contribution. Due by May 1, 2008 Added to Fees OFFICERS AND DIRECTORS 10. TITLE DP NAME MENDEL, RAYMOND STREET ADDRESS 1045 PRESTWICK PL U00000829543 02/26/08-80044-022 61.25 CITY-ST-ZIP DUNEDIN, FL 34698 DT TITLE NAME LOESCH, THOMAS J STREET ADDRESS 1633 HAYWICK TERR CITY-ST-ZIP DUNEDIN, FL 34698 DVP TITLE NAME BEATTY, SYLVIA STREET ADDRESS 1040 PRESTWICK PLACE. DO NOT WRITE CITY-ST-ZIP DUNEDIN, FL 34698 11Th F IN THIS SPACE NAME BUGENHAGEN, KENNETH STREET ADDRESS 1643 HAYWICK TERRACE CITY-ST-ZIP DUNEDIN, FL 34698 TITLE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

Homas J. Fread

NAME

NAME STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

PAPIA, MARK

1060 PRESTWICK PLACE

DUNEDIN, FL 34698

2-12-08

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