2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Grace Spence, Treasurer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

Secretary of State 02-16-2006 90040 013 ****61.25 DOCUMENT # N9600001103 HIGHLANDS GLEN HOMEOWNERS ASSOCIATION, INC. AAATALTA Principal Place of Business Mailing Address 242 HIGHLANDS GLEN CIR. 242 HIGHLANDS GLEN CIR. WINTER SPRINGS, FL 32708 WINTER SPRINGS, FL 32708 US 2. Principal Place of Business 3. Mailing Address 222 Highlands Glen Cr 222 Highlands Glen Cr. Suite, Apt. #, etc. Suite, Apt. #, etc. 01112006 Chg-NP CR2E037 (11/05) City & State Winter Springs, FL City & State Vinter Springs, FL Applied For 4. FEI Number 59-3446145 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired 32.7.08 327.0.8 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Grace Spence O'SULLIVAN, VIRGINIA Street Address (P.O. Box Number is Not Acceptable) 242 HIGHLANDS GLEN CIRCLE WINTER SPRINGS, FL 32708 222 Highlands Glen Circle Winter Springs 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. asurer unce SIGNÁTURE agent and title if applicat (NOTE: Registered Agent signature required when reinstating) Killing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2006 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. VD TITLE Delete TITLE ■ Addition JACOBS, MARGE NAME NAME 236 HIGHLANDS GLEN CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-7IP WINTER SPRINGS, FL 32708 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Channe ☐ Addition **EVANS, KATHLEEN** 238 HIGHLANDS GLEN CIRCLE STREET ADDRESS STREET ADDRESS WINTER SPRINGS, FL 32708 CJTY - ST - ZIP CITY-ST-ZIP TD TITLE Delete Change Addition SPENCE, GRACE NAME NAME STREET ADDRESS 222 HIGHLANDS GLEN CIRCLE STREET ADDRESS WINTER SPRINGS, FL 32708 CITY-ST-7IP CITY-ST-ZIP SD X Delete TITLE ☐ Change ☐ Addition TITLE DOE, JENNIFER NAME NAME 234 HIGHLANDS GLEN CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WINTER SPRINGS, FL 32708 CITY-ST-ZIP ☐ Delete ☐ Change TITLE TITI F ☐ Addition NAME SHELLY, LESLIE NAME 228 HIGHLANDS GLEN CIRCLE STREET ADDRESS STREET ADDRESS WINTER SPRINGS, FL 32708 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

Daytime Phone #

FILED Feb 16, 2006 8:00 am