

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 30, 2002 8:00 am**  
**Secretary of State**

04-30-2002 90211 003 \*\*\*\*61.25

**DOCUMENT # N98000001699**

1. Entity Name

**HIGHSMITH LANDING HOMEOWNERS ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

2514 HIGHSMITH LANDING LANE  
JACKSONVILLE FL 32226

2514 HIGHSMITH LANDING LANE  
JACKSONVILLE FL 32226

2. Principal Place of Business

3. Mailing Address

2505 Highsmith Landg Ln

2505 Highsmith Landg Ln

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

JACKSONVILLE FL

JACKSONVILLE FL

Zip

Country

Zip

Country

32226

USA

32226

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3499440

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BELL, JOHN M  
2514 HIGHSMITH LANDING LANE  
JACKSONVILLE FL 32226

Name

HERNANDEZ, GWEN

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

2505 HIGHSMITH LANDING LN

City

JACKSONVILLE

FL

Zip Code

32226

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.

SIGNATURE

Gwendolyn A. Hernandez

Gwendolyn A. Hernandez

4-13-02

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

T  
NAME MCBROOM, DAVID N  
STREET ADDRESS 2510 HIGHSMITH LANDING LANE  
CITY-ST-ZIP JACKSONVILLE FL 32226

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

T  
NAME PECK, WILBUR J  
STREET ADDRESS 2526 HIGHSMITH LANDING LANE  
CITY-ST-ZIP JACKSONVILLE FL 32226

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

T  
NAME SPENCER, RALPH  
STREET ADDRESS 2501 HIGHSMITH LANDING LN  
CITY-ST-ZIP JACKSONVILLE FL 32226

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

P  
NAME BELL, JOHN  
STREET ADDRESS 2514 HIGHSMITH LANDING LN  
CITY-ST-ZIP JACKSONVILLE FL 32226

☐ Change ☒ Addition  
TITLE PRESIDENT  
NAME GWEN HERNANDEZ  
STREET ADDRESS 2505 HIGHSMITH LANDING LN.  
CITY-ST-ZIP JACKSONVILLE, FL 32226

S  
NAME MCBROOM, LAVON  
STREET ADDRESS 2510 HIGHSMITH LANDING LN  
CITY-ST-ZIP JACKSONVILLE FL 32226

☐ Change ☒ Addition  
TITLE SECRETARY  
NAME BONNIE SMITH  
STREET ADDRESS 2521 HIGHSMITH LANDING LN  
CITY-ST-ZIP JACKSONVILLE FL 32226

☐ Delete  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

12. I 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 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:

Bonnie Smith

4-1-02

904-7579550

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)