

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005728

FILED  
Jan 09, 2006  
Secretary of State

**Entity Name:** HIGHLANDS RESERVE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

217 WINTER PARK ST.  
DAVENPORT, FL 33897 US

**New Principal Place of Business:**

215 CELEBRATION PLACE  
SUITE 500  
CELEBRATION, FL 34747 US

**Current Mailing Address:**

P.O. BOX 137573  
CLERMONT, FL 34713 US

**New Mailing Address:**

215 CELEBRATION PLACE  
SUITE 500  
CELEBRATION, FL 34747 US

**FEI Number:** 52-2127291

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LARSEN, RICHARD E ESQ.  
55 EAST PINE STREET  
ORLANDO, FL 32801 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: CARUSONE, JOE  
Address: 216 DORNOCH STREET  
City-St-Zip: DAVENPORT, FL 33897

Title: VP ( ) Delete  
Name: WALKER, ROBERT  
Address: 547 GLENEAGLES CIRCLE  
City-St-Zip: DAVENPORT, FL 33897

Title: ST ( ) Delete  
Name: VAN GRONDELLE, GARY  
Address: 508 BRIGHTON STREET  
City-St-Zip: DAVENPORT, FL 33897

Title: D ( ) Delete  
Name: RICHARDSON, PETER  
Address: 212 NOTTINGHAM WAY  
City-St-Zip: DAVENPORT, FL 33897

Title: D (X) Delete  
Name: SMITH, JEFFREY  
Address: 223 FORESTWICK DRIVE  
City-St-Zip: DAVENPORT, FL 33897

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: SMITH, JEFFREY  
Address: 233 PRESTWICK DRIVE  
City-St-Zip: DAVENPORT, FL 33897

Title: S (X) Change ( ) Addition  
Name: VAN GRONDELLE, GARY  
Address: 508 BRIGHTON DRIVE  
City-St-Zip: DAVENPORT, FL 33897

Title: D (X) Change ( ) Addition  
Name: WHITTLE, GEOFF  
Address: 724 TROON CIRCLE  
City-St-Zip: DAVENPORT, FL 33897

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GARY VAN GRONDELLE

S

01/09/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date