## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000001727

FILED Apr 13, 2012 Secretary of State

Entity Name: HIGHLAND OAKS OWNERS ASSOCIATION, INC.

Current Principal Place of Business:
METROPOLITAN LIFE INSURANCE CO.

New Principal Place of Business:

2 N. RIVERSIDE PLAZA 2100

CHICAGO, IL 60606

TAMPA, FL 33606

**New Mailing Address:** 

600 E. 96TH STREET SUITE 100 LEGAL DEPARTMENT

**Current Mailing Address:** 

C/O ANN M. SCHNEIDER 2 N. RIVERSIDE PLAZA, SUITE 2100

INDIANAPOLIS, IN 46240

C/O WYNNTON GROUP, 511 BAY ST., STE. 410

CHICAGO, IL 60606

FEI Number: 58-2570309

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CT CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION, FL 33324 U

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

FEI Number Applied For ( )

Date

## **OFFICERS AND DIRECTORS:**

Title: DP

Name: BURDI, THOMAS

Address: 2311 CEDAR SPRINGS, #300 City-St-Zip: DALLAS, TX 75201 US

Title: DVP

 Name:
 HAMILTON, STEVE

 Address:
 2311 CEDAR SPRINGS, #300

 City-St-Zip:
 DALLAS, TX 75201 US

Title: DVPS

 Name:
 RUBENSTEIN, ALEC

 Address:
 2 N. RIVERSIDE PLAZA

 City-St-Zip:
 CHICAGO, IL 60606 US

Title: DT

Name: SHULTS, ROB

Address: 2311 CEDAR SPRINGS, #300 City-St-Zip: DALLAS, TX 75201 US

Title: AS

Name: SCHNEIDER, ANN M Address: 2 N. RIVERSIDE PLAZA City-St-Zip: CHICAGO, IL 60606 US

Title: VF

 Name:
 KLANK, MARIKAY

 Address:
 2 N. RIVERSIDE PLAZA

 City-St-Zip:
 CHICAGO, IL 60606

I hereby 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 all other like empowered.

SIGNATURE: ANN M. SCHNEIDER

Electronic Signature of Signing Officer or Director

AS

04/13/2012