

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000008087

**Entity Name:** NORMANDY HEIGHTS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4110 S. FLORIDA AVE; SUITE 200  
LAKELAND, FL 33813

**Current Mailing Address:**

4110 S. FLORIDA AVE; SUITE 200  
LAKELAND, FL 33813 US

**FEI Number:** 51-0594779

**Certificate of Status Desired:** No

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

HIGHLAND COMMUNITY MANAGEMENT, LLC  
4110 S. FLORIDA AVE; SUITE 200  
LAKELAND, FL 33813 US

*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

**Officer/Director Detail :**

Title           DIRECTOR  
Name           FORD, ERIC  
Address        4110 S. FLORIDA AVE; SUITE 200  
City-State-Zip: LAKELAND FL 33813

Title           SECRETARY, TREASURER  
Name           BAUGH, TINA  
Address        4110 S. FLORIDA AVE; SUITE 200  
City-State-Zip: LAKELAND FL 33813

Title           PRESIDENT  
Name           GILLEN, DAVID  
Address        4110 S. FLORIDA AVE; SUITE 200  
City-State-Zip: LAKELAND FL 33813

Title           DIRECTOR  
Name           LYONS, JOSEPH  
Address        4110 S. FLORIDA AVE; SUITE 200  
City-State-Zip: LAKELAND FL 33813

Title           VP  
Name           SPANBAUER, TIM JAMES  
Address        4110 S. FLORIDA AVE; SUITE 200  
City-State-Zip: LAKELAND FL 33813

*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:** DAVID GILLEN

**PRESIDENT**

**01/03/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date