## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000005425

**Entity Name: HIGHLAND OFFICE CENTER PROPERTY OWNERS** 

ASSOCIATION, INC.

**Current Principal Place of Business:** 

34921 US HIGHWAY 19 N PALM HARBOR, FL 34684

**Current Mailing Address:** 

34921 US HIGHWAY 19 N PALM HARBOR, FL 34684 US

FEI Number: 46-2419768 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SWOPE LAW, P.L. 34921 US HIGHWAY 19 N STE 200 PALM HARBOR, FL 34684 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

FILED Jan 12, 2018

**Secretary of State** 

CC5365893981

Officer/Director Detail:

Title PD Title VPD

Name SWOPE, SCOTT Name LAGAMBA, WILLIAM

Address 34921 US HIGHWAY 19 N Address 34911 US HIGHWAY 19 N

City-State-Zip: PALM HARBOR FL 34684 City-State-Zip: PALM HARBOR FL 34684

Title D Title ST

Name MASHNOUK, FADI Name SWOPE, MARGARET

Address 8441 E 32ND STREET N Address 34921 US HIGHWAY 19 N

STE 200

City-State-Zip: WICHITA KS 67226

City-State-Zip: PALM HARBOR FL 34684

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.

Electronic Signature of Signing Officer/Director Detail