## 2025 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 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** Mar 20, 2025

**Secretary of State** 

6349793640CC

Officer/Director Detail:

Title PD Title **VPD** 

Name SWOPE, SCOTT Name LAGAMBA, WILLIAM

Address 34921 US HIGHWAY 19 N Address 15 SOMERSET ST

602 PALM HARBOR FL 34684

City-State-Zip: City-State-Zip: CLEARWATER FL 33767

Title D

Title Name MASHNOUK, FADI

SWOPE, MARGARET Name 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.

SIGNATURE: SCOTT P. SWOPE **PRESIDENT**