

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**APPROVED
AND
FILED**

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

95 JUN -1 PM 1:23

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # 403877 (4)

1. Corporation Name

THE HIGHLIGHTER OF VERO BEACH, INC.

Principal Place of Business

**2213 7TH AVE
VERO BEACH FL 32960-5164**

Mailing Address

**2213 7TH AVE
VERO BEACH FL 32960-5164**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

06/27/1972

3a. Date of Last Report

04/04/1994

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1415276

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

7. This corporation has liability for intangibles tax under S. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

**COKER, CHARLES L.
2213 7TH AVENUE
VERO BEACH FL 32960**

10. Name and Address of New Registered Agent

81. Name

ED DEAN

82. Street Address (P.O. Box Number is Not Acceptable)

125 QUEEN BESS COURT

83.

84. City

FT. PIERCE

FL

85. Zip Code

34949

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE * **ED DEAN**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent Signature required when reappointing)

DATE

5-5-95

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	COKER, CHARLES L.
STREET ADDRESS	2213 7TH AVE
CITY - ST - ZIP	VERO BEACH FL
TITLE	DST
NAME	DEAN, ED
STREET ADDRESS	2213 7TH AVE
CITY - ST - ZIP	VERO BEACH FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	S/T	☐ Change ☒ Addition
2. NAME	NANCY DEAN	
3. STREET ADDRESS	125 QUEEN BESS COURT	
4. CITY - ST - ZIP	FT. PIERCE, FL. 34949	
21. TITLE	P	☒ Change ☐ Addition
22. NAME	ED DEAN	
23. STREET ADDRESS	125 QUEEN BESS COURT	
24. CITY - ST - ZIP	FT. PIERCE, FL. 34949	
31. TITLE		☐ Change ☐ Addition
32. NAME		
33. STREET ADDRESS		
34. CITY - ST - ZIP		
41. TITLE		☐ Change ☐ Addition
42. NAME		
43. STREET ADDRESS		
44. CITY - ST - ZIP		
51. TITLE		☐ Change ☐ Addition
52. NAME		
53. STREET ADDRESS		
54. CITY - ST - ZIP		
61. TITLE		☐ Change ☐ Addition
62. NAME		
63. STREET ADDRESS		
64. CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Ed Dean**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ED DEAN

5-5-95

Date

407-567-6657

Telephone Number