


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2007 08:00 AM
Secretary of State

DOCUMENT # N97000004223

1. Entity Name
BOYS & GIRLS CLUB OF HIGHLANDS COUNTY, INC.



Principal Place of Business: **111 MARTIN LUTHER KING JR. BLVD SEBRING, FL 33870**

Mailing Address: **2221 U.S. 27 SOUTH SEBRING, FL 33870**

DO NOT WRITE IN THIS SPACE



02232007 No Chg-NP CR2E037 (4/06)

4. FEI Number **59-3468588** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**HILTON, FORREST H
 702 US 27 NORTH
 AVON PARK, FL 33825**

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
 Due by May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HILTON, FORREST 702 U.S. 27 SOUTH AVON PARK, FL 33825
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DIXON, BILL 531 TASESTHEE DRIVE SEBRING, FL 33870
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RYMES, JENNIFER 4507 HARDER AVENUE SEBRING, FL 33875
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHANEY, GERALD 1500 U.S. 27 S AVON PARK, FL 33825
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WASHINGTON, RAMONA 227 U.S. 27 SEBRING, FL 33870
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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U00000671495
 03/28/07-80031-010 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Forrest H. Hilton* **FORREST H. HILTON** **3-5-2007** **(863)452-2906**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #