

2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Sep 28, 2010
Secretary of State**

DOCUMENT# P29019

Entity Name: HIGH PLAINS CAPITAL CORPORATION

Current Principal Place of Business:

C/O MEYERS & ASSOCIATE CPA PA
5725 CORPORATE WAY, SUITE 101
WEST PALM BEACH, FL 33407 US

New Principal Place of Business:

700 SOUTH OLIVE AVENUE
WEST PALM BEACH, FL 33401 US

Current Mailing Address:

C/O MEYERS & ASSOCIATE CPA PA
5725 CORPORATE WAY, SUITE 101
WEST PALM BEACH, FL 33407 US

New Mailing Address:

C/O MEYERS & ASSOCIATE, CPA, PA
4540 PGA BOULEVARD, SUITE 216
PALM BEACH GARDENS, FL 33418 US

FEI Number: 59-1942407 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEYERS, GAIL C
C/O MEYERS & ASSOCIATE CPA PA
5725 CORPORATE WAY, #101
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

MEYERS, GAIL C
4540 PGA BOULEVARD
SUITE 216
PALM BEACH GARDENS, FL 33418 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: _____ 09/28/2010
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD
Name: HALMOS, PETER
Address: 700 SOUTH OLIVE AVENUE
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: T
Name: MEYERS, GAIL C
Address: 4540 PGA BOULEVARD, SUITE 216
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: S
Name: HALMOS, NICHOLAS K
Address: 700 SOUTH OLIVE AVENUE
City-St-Zip: WEST PALM BEACH, FL 33401 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GAIL C. MEYERS T 09/28/2010
Electronic Signature of Signing Officer or Director Date