

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000108744

**FILED**  
**Feb 16, 2015**  
**Secretary of State**  
**CC8492118571**

**Entity Name:** HIGHLAND BLVD. PROPERTIES, L.L.C.

**Current Principal Place of Business:**

213 N. APOPKA AVE.  
INVERNESS, FL 34450

**Current Mailing Address:**

P.O. BOX 583  
INVERNESS, FL 34451 US

**FEI Number:** 59-3676487

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FITZPATRICK, R. SHAWN  
213 NORTH APOPKA AVENUE  
INVERNESS, FL 34450 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

**Authorized Person(s) Detail :**

Title MGRM  
Name FITZPATRICK, NANCY B  
Address 105 W. HIGHLAND BLVD.  
City-State-Zip: INVERNESS FL 34452

Title MGRM  
Name VANALLEN, LINDA C  
Address P.O. BOX 583  
City-State-Zip: INVERNESS FL 34451

Title MGRM  
Name HIMMEL, SANDRA C  
Address 201 W. HIGHLAND BLVD.  
City-State-Zip: INVERNESS FL 34452

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** LINDA C. VANALLEN

**MANAGER**

**02/16/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date