## 2008 FOR PROFIT CORPORATION ANNUAL REPORT **DOCUMENT #358125** THE WILLISTON HIGHLANDS DEVELOPMENT CORP.

**FILED** May 22, 2008 8:00 am Secretary of State 05-22-2008 90019 027 \*\*\*150.00

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			1000	125						
Principal Place of Business Mailing Address					60	0043424				
2601 BISCAYNE BOULEVARD POST OFFICE DRAWER 370308 MIAMI, FL 33137		2601 BISCAYNE BOULEVARD POST OFFICE DRAWER 370308 MIAMI, FL 33137			•	•	11 8   8   1   1   1   1   1   1   1   1			
,	lace of Business - No P.O. Box #	3. Mailing Address								
2601		2601 Biscay	ne BLVD		I INNESS RII	#1 W) W: #W W#   W W   W W		W  ##    ###	114M2    14M6	
Suite, Apt.	#, etc.	Suite, Apt, #, etc.			04302008	Chg-P	CR2E0	34 (12/06)		
City & State  M. AM I. FL		City & State MIAMI, FL			4. FEI Numb			· · · · ·	plied For	
3313	Country	Zíp	Country					\$8.75 Add	t Applicable	
3313	7 USA	33137	<sup>ر</sup> نستن A	•		of Status Desired	!!	Fee Require		
	6. Name and Address of Current R	egistered Agent	Name		7. Name and	Address of New I	Registered A	\gent		
RODRIGUEZ, ANTONIO										
2601 BISCAYNE BLVD. MIAMI, FL 33137			Sireer Ad	Street Address (P.O. Box Number is Not Acceptable)						
			City				FL	Zip Cod	e	
8. The above the obligat	named entity submits this statement for ions of registered agent.	the purpose of changing its re	egistered office or	registere	ed agent, or bo	oth, in the State of Fl	lorida. Lam I	amiliar with,	and accept	
SIGNATURE	Signally's, typed or printed name of registered agent an	d title if applicable. (NOTE: F	Registered Agent signatur	le tedhiled	when reinstating)		DATE			
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign     Trust Fund Contrib			00 May Be ed to Fees					
10.	OFFICERS AND D		11.	S	ADDITIONS	/CHANGES TO OF	FICERS AND	DIRECTOR	S IN 11	
TITLE .	STD GOLDSTEIN, MICHELLE	☐ Delete	THTLE NAME	240	LFR. M	ICHERE		<b>TO</b> Change	Addition	
STREET ADDRESS	2601 BISCAYNE BLVD		STREET ADDRESS	76	i Bisca	que BLUD				
CITY-ST-ZIP	MIAMI, FL		CITY-ST-ZIP	n	TIAMI,	<u>د</u> ــــــــــــــــــــــــــــــــــــ				
TITLE	DP	☐ Delete	TITLE					Change	Addition	
NAMÉ STOCET LOODEGE	MILLER, ROGER		NAME							
STREET ADDRESS CITY-ST-ZIP	2601 BISCAYNE BLVD. MIAMI, FL		STREET ADDRESS CITY-ST-ZIP							
TITLE	<u>.</u>	☐ Delete	TITLE					☐ Change	Addition	
NAME			NAME							
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP							
TITLE	<u>, , , , , , , , , , , , , , , , , , , </u>	☐ Delete	TITLE					Change	☐ Addition	
NAME			NAME							
STREET ADDRESS			STREET ADDRESS							
CITY-ST-ZIP		Dru	CITY-ST-ZIP					Change	- Addition	
TITLE NAME		☐ Delete	TITLE NAME					☐ Change	■ Addition	
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TITLE		☐ Delete	TITLE			······································		☐ Change	☐ Addition	
NAME			NAME							
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS							
49	and the short short state of the same at t	No office and the second	CITY-ST-ZIP							

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 receive or thrustee information as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 at Block 11 if changed, or on an attachment with an accurate St. with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR