2004 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT DOCUMENT # 403877

Principal Place of Business

1. Entity Name

2213 7TH AVE VERO BEACH, FL 32960-5164

THE HIGHLITER OF VERO BEACH, INC.

Mailing Address 2213 7TH AVE

VERO BEACH, FL 32960-5164

FILED Feb 02, 2004 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

01262004

No Chg-P

CR2E034 (10/03)

4.	FEI Number
	59-1415276

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6.	Name a	nd Address of	Current Reg	istered Agent

DEAN, ED 125 QUEEN BESS COURT FT. PIERCE, FL 34949

SIGNATURE:

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 Signature, typed or prixed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) DATE								
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		Election Campaign Financin Trust Fund Contribution.	9 🛘	\$5.00 May Be Added to Fees	000000031462 02/04/04-80149-013 150.00			
10.	OFFICERS AND DIREC	CTORS						
TITLE NAME STREET ADDRESS CITY-ST-EP	P DEAN, ED 125 QUEEN BESS CT FT PIERCE, FL 34949							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST DEAN, NANCY 125 QUEEN BESS CT FT PIERCE, FL 34949							
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE			
TITLE NAME STREET ADDRESS CRY-ST-ZP				IN .	THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				·				
TITLE NAME STREET ADORESS CITY-SI-ZIP					and the second s			
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 affect as it 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.								