FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 713046 (1)

1. Corporation Name

HIGHLANDS ART LEAGUE, INCORPORATED

Principal Place of Business	Mailing Address
351 W. CENTER AVENUE SEBRING FL 33870-0507	351 W. CENTER AVENUE SEBRING FL 33870-0507

3. Date Incorporated or Qualified: 07/07/1967

3a. Date of Last Report: 05/01/1995

2. Principal Place of Business — 21

2a. Mailing Address — 26

Suite, Apt. #, etc. — 22

Suite, Apt. #, etc. — 27

City & State — 23

City & State — 28

Zip — 24 Country — 25

Zip — 29 Country — 30

4. FEI Number: 59-1211648 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

WILBUR E. YOUNG
106 LOQUAT ROAD N.W.
LAKE PLACID FL 33852

10. Name and Address of New Registered Agent

81 Name: Susan Haynes

82 Street Address (P.O. Box Number is Not Acceptable): 2801 Snyder Road

83

84 City: Sebring FL 85 Zip Code: 33870

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Susan Haynes — Susan Haynes, Treasurer — 4/26/96
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	SIEGRIST, WES		1.2 NAME		
STREET ADDRESS	3396 NW 34TH AVE.		1.3 STREET ADDRESS		
CITY-ST-ZIP	OKEECHOBEE FL		1.4 CITY-ST-ZIP		
TITLE	VD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	SUMMERS, ELIZABETH K.		2.2 NAME		
STREET ADDRESS	842 TANGERINE ROAD N.W.		2.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE PLACID FL		2.4 CITY-ST-ZIP		
TITLE	SD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	FETTERS, JAN		3.2 NAME		
STREET ADDRESS	4608 PITCHING WEDGE WAY		3.3 STREET ADDRESS		
CITY-ST-ZIP	SEBRING FL		3.4 CITY-ST-ZIP		
TITLE	VD	☒ DELETE	4.1 TITLE	V/D	☒ Change ☐ Addition
NAME	DUMONT, DARIAN D.		4.2 NAME	Kathy Prentice	
STREET ADDRESS	1381 TAALBOTT AVE.		4.3 STREET ADDRESS	2708 S. Crystal Lake Dr.	
CITY-ST-ZIP	AVON PARK FL		4.4 CITY-ST-ZIP	Avon Park, FL 33825	
TITLE	VD	☒ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	HEIM, BETTY		5.2 NAME		
STREET ADDRESS	3633 SUNRISE		5.3 STREET ADDRESS		
CITY-ST-ZIP	SEBRING FL		5.4 CITY-ST-ZIP		
TITLE	D	☒ DELETE	6.1 TITLE	T	☐ Change ☒ Addition
NAME	YOUNG, WILBUR E.		6.2 NAME	Susan Haynes	
STREET ADDRESS	106 LOQUAT ROAD NW		6.3 STREET ADDRESS	2801 Snyder Rd.	
CITY-ST-ZIP	LAKE PLACID FL		6.4 CITY-ST-ZIP	Sebring, FL 33870	

CR2E037 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Susan Haynes — Susan Haynes, Treasurer — 4/26/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date

Daytime Phone # (941) 385-6312