FILE NOW: FILING FEE IS $61.25

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May 13 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

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 33870-3109

3. Date Incorporated or Qualified: 07/07/1967
3a. Date of Last Report: 05/01/1996

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

SUSAN HAYNES
2801 SNYDER ROAD
SEBRING FL 33870

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☒ DELETE	1.1 TITLE	P/D	☒ Change ☐ Addition
NAME	SIEGRIST, WES		1.2 NAME	Mike Fitch	
STREET ADDRESS	3396 NW 34TH AVE.		1.3 STREET ADDRESS	3013 Creekside Ct.	
CITY-ST-ZIP	OKEECHOBEE FL		1.4 CITY-ST-ZIP	Sebring, FL 33872	
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	S/D	☒ Change ☐ Addition
NAME	FETTERS, JAN		3.2 NAME	Judy Nugent	
STREET ADDRESS	4608 PITCHING WEDGE WAY		3.3 STREET ADDRESS	2815 Par Rd.	
CITY-ST-ZIP	SEBRING FL		3.4 CITY-ST-ZIP	Sebring, FL 33872	
TITLE	VD	☒ DELETE	4.1 TITLE	D	☐ Change ☒ Addition
NAME	PRENTICE, KATHY		4.2 NAME	Darian D. Dumont	
STREET ADDRESS	2708 S. CRYSTAL LAKE DRIVE		4.3 STREET ADDRESS	2115 Sunset Dr.	
CITY-ST-ZIP	AVON PARK FL		4.4 CITY-ST-ZIP	Sebring, FL 33870	
TITLE	VD	☒ DELETE	5.1 TITLE	D	☐ Change ☒ Addition
NAME	HEIM, BETTY		5.2 NAME	Aida Schumacher	
STREET ADDRESS	3633 SUNRISE		5.3 STREET ADDRESS	1901 DeSoto Pl.	
CITY-ST-ZIP	SEBRING FL		5.4 CITY-ST-ZIP	Sebring, FL 33870	
TITLE	T	☒ DELETE	6.1 TITLE	T/D	☒ Change ☐ Addition
NAME	HAYNES, SUSAN		6.2 NAME	John McClure	
STREET ADDRESS	2801 SNYDER ROAD		6.3 STREET ADDRESS	3045 Snyder Rd.	
CITY-ST-ZIP	SEBRING FL		6.4 CITY-ST-ZIP	Sebring, FL 33870	

CR2E037 (9/96)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: SIGNATURE REQUIRED 4/30/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 0054185