

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90090 018 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 713046 1. Corporation Name HIGHLANDS ART LEAGUE, INCORPORATED					
Principal Place of Business 351 W. CENTER AVENUE SEBRING FL 33870-0507			Mailing Address 351 W. CENTER AVENUE SEBRING FL 33870-0507		



2. Principal Place of Business 21 351 W. CENTER AVE. Suite, Apt. #, etc. Sebring, FL City & State 23 33870- Zip 24 33870-0507 25 USA Country		2a. Mailing Address 26 351 W. CENTER AVE. Suite, Apt. #, etc. Sebring, FL City & State 28 33870-0507 29 USA Country		3. Date Incorporated or Qualified 07/07/1967 4. FEI Number 59-121648 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required 6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees Trust Fund Contribution	
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9. Name and Address of Current Registered Agent SWAINE, MIKE A 425 S COMMERCE AVE 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	
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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
 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	PRESIDENT ☐ Change ☒ Addition
NAME	ANDREWS, JACKIE	1.2 NAME	GENE BRENNER
STREET ADDRESS	4022 WESTMINSTER RD	1.3 STREET ADDRESS	1631 ROOSEVELT AVE.
CITY-ST-ZIP	SEBRING FL 33872	1.4 CITY-ST-ZIP	Sebring, FL 33872
TITLE	D ☒ DELETE	2.1 TITLE	1st Vice President ☐ Change ☒ Addition
NAME	CROSS, PATSY	2.2 NAME	JESSE L. CLAUSE
STREET ADDRESS	3718 CREEKSIDE DR	2.3 STREET ADDRESS	P.O. Box 1464
CITY-ST-ZIP	SEBRING FL 33870	2.4 CITY-ST-ZIP	Sebring, FL 33871-1464
TITLE	D ☒ DELETE	3.1 TITLE	2nd Vice President ☐ Change ☒ Addition
NAME	SUMMERS, B J	3.2 NAME	JANET KING
STREET ADDRESS	842 TANGERINE RD NW	3.3 STREET ADDRESS	841 NE LAKEVIEW DR.
CITY-ST-ZIP	LAKE PLACID FL 33852	3.4 CITY-ST-ZIP	Sebring, FL 33870
TITLE	D ☒ DELETE	4.1 TITLE	3rd Vice President ☐ Change ☒ Addition
NAME	FETTERS, JAN	4.2 NAME	Betty Heim
STREET ADDRESS	4608 PITCHING WEDGE WAY	4.3 STREET ADDRESS	3633 SUNRISE DR.
CITY-ST-ZIP	SEBRING FL 33872	4.4 CITY-ST-ZIP	Sebring, FL 33872
TITLE	SD ☒ DELETE	5.1 TITLE	4th Vice President ☐ Change ☒ Addition
NAME	CARLISLE, BETTY	5.2 NAME	SHARON GUNTHERP
STREET ADDRESS	3145 PARADISE PATH	5.3 STREET ADDRESS	1901 US 27 SOUTH
CITY-ST-ZIP	SEBRING FL 33870	5.4 CITY-ST-ZIP	Sebring, FL 33870
TITLE	TD ☒ DELETE	6.1 TITLE	SECRETARY ☐ Change ☒ Addition
NAME	YOUNG, WILBUR	6.2 NAME	MARJORIE BATES
STREET ADDRESS	106 LOQUAT RD	6.3 STREET ADDRESS	3190 GROVE AVE.
CITY-ST-ZIP	LAKE PLACID FL 33852	6.4 CITY-ST-ZIP	Avon Park, FL 33825

14. I 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, with all other like empowered.

SIGNATURE:

[Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

[Signature] 4/30/99 941-385-5312
 DATE DAYTIME PHONE

CR2E037 (11/98)