

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2003 8:00 am
Secretary of State

02-05-2003 90108 005 ****61.25

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DOCUMENT # 713046

1. Entity 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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1211648**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**SWANE, MIKE A
425 S COMMERCE AVE
SEBRING FL 33870**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PD	☒ Delete
NAME	BRENNER, GENE	
STREET ADDRESS	1631 ROOSEVELT AVE	
CITY-ST-ZIP	SEBRING FL 33872	
TITLE	PD	☒ Delete
NAME	CLOUSE, JESSE L	
STREET ADDRESS	P.O. BOX 1484	
CITY-ST-ZIP	SEBRING FL 33871-1484	
TITLE	T	☒ Delete
NAME	HANCOCK, TAMMY J	
STREET ADDRESS	435 SOUTH COMMERCE AVE	
CITY-ST-ZIP	SEBRING FL 33870-3702	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	☒ Change ☐ Addition
NAME	Boley, Marie	
STREET ADDRESS	646 W. Lake Drive Blvd	
CITY-ST-ZIP	Sebring FL 33875	
TITLE	VD	☐ Change ☒ Addition
NAME	Kahn, Marvin	
STREET ADDRESS	2207 NE Lakewood Dr	
CITY-ST-ZIP	Sebring FL 33870	
TITLE	T.D.	☒ Change ☐ Addition
NAME	Wohl, Jeri	
STREET ADDRESS	1800 SR 175	
CITY-ST-ZIP	Avon Park, FL 33825	
TITLE	SD	☐ Change ☒ Addition
NAME	Fuller, Sonia	
STREET ADDRESS	2117 Vantage Trace	
CITY-ST-ZIP	Sebring FL 33872	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 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 receiver or trustee empowered to execute this report as required by Chapter 617, 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.

SIGNATURE

JUSTIN W. BIERHOHL, TREASURER

1/20/03

863/385-5312

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)