

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719239

FILED  
Jul 10, 2007  
Secretary of State

**Entity Name:** HIGHLANDS LAKES VOLUNTEER FIRE AND RESCUE ASSOCIATION, INC.

**Current Principal Place of Business:**

2840 N HIGHLANDS BLVD.  
AVON PARK, FL 33825

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 7  
AVON PARK, FL 33825

**New Mailing Address:**

P.O. BOX 7  
AVON PARK, FL 33826 US

**FEI Number:** 59-6533620 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

JOLIN, MICHELLE D  
2132 N ZEPHYR RD  
AVON PARK, FL 33825 US

**Name and Address of New Registered Agent:**

MORSE, MICHAEL P  
2451 N. AVON BLVD.  
AVON PARK, FL 33825 US

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.

SIGNATURE: MICHAEL MORSE

07/10/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: T ( ) Delete  
Name: JOLIN, MICHELLE  
Address: 2132 N ZEPHYR RD  
City-St-Zip: AVON PARK, FL 33825

Title: SD ( ) Delete  
Name: FERRANTE, SUMMER  
Address: 5135 FELBER RD.  
City-St-Zip: AVON PARK, FL 33825

Title: D ( ) Delete  
Name: SMITH, AMBER  
Address: 127 SOUTH PROSPECT AVE  
City-St-Zip: AVON PARK, FL 33825

Title: VP ( ) Delete  
Name: OLSEN, KURT  
Address: 5215 MICHON PATH  
City-St-Zip: AVON PARK, FL 33825

Title: P ( ) Delete  
Name: MORSE, MIKE  
Address: P.O. BOX 612  
City-St-Zip: AVON PARK, FL 33826

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: MORSE, MICHAEL P  
Address: P.O. BOX 1871  
City-St-Zip: AVON PARK, FL 33826 US

Title: VP (X) Change ( ) Addition  
Name: OLSEN, KURT  
Address: 5215 MICHON PATH  
City-St-Zip: AVON PARK, FL 33825 US

Title: SD (X) Change ( ) Addition  
Name: FALK, CELIA M  
Address: 309 THOMAS AVE  
City-St-Zip: FROSTPROOF, FL 33843 US

Title: T (X) Change ( ) Addition  
Name: JOLIN, MICHELLE  
Address: 2132 N. ZEPHER RD.  
City-St-Zip: AVON PARK, FL 33825 US

Title: D (X) Change ( ) Addition  
Name: HECKARD, JUSTIN R  
Address: 309 THOMAS AVE.  
City-St-Zip: FROSTPROOF, FL 33843 US

Title: D ( ) Change (X) Addition  
Name: SIMPSON, JAMES T  
Address: 21 W. RAYMOND ST.  
City-St-Zip: AVON PARK, FL 33825 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL MORSE

P

07/10/2007

Electronic Signature of Signing Officer or Director

Date