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Apr 06 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998

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



DOCUMENT # 735897 (1)

1. Corporation Name

HIGHLANDS ASSOCIATION OF REALTORS, INC.

Principal Place of Business
3200 US 27 SOUTH, STE.204
STE. 302
SEBRING FL 33870
US

Mailing Address
3200 US 27 SOUTH, STE.204
STE. 302
SEBRING FL 33870
US



2. Principal Place of Business
21 3200 US 27 South
Suite, Apt. #, etc.
22 302
City & State
23 Sebring FL
Zip
24 33870
Country
25 US

2a. Mailing Address
26 3200 US 27 South
Suite, Apt. #, etc.
27 302
City & State
28 Sebring FL
Zip
29 33870
Country
30 US

3. Date Incorporated or Qualified
05/24/1976

4. FEI Number
59-1684961

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

7. Is this nonprofit corporation a homeowners association?
☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
☐ Yes ☒ No

9. Name and Address of Current Registered Agent

FULCHER, LYNDA D
3200 US 27 SOUTH, STE.204
STE. 302
SEBRING FL 33870

10. Name and Address of New Registered Agent

81 Name
Debra A. Marine

82 Street Address (P.O. Box Number is Not Acceptable)
3200 US 27 South Suite 302

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 Debra A. Marine Association Executive DATE 3-9-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input checked="" type="checkbox"/> DELETE	1.1 TITLE	President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARTER, PERRY	1.2 NAME	Steve MARABEL
STREET ADDRESS	4250 GEORGE BLVD	1.3 STREET ADDRESS	3602 MONROE DR.
CITY-ST-ZIP	SEBRING FL	1.4 CITY-ST-ZIP	SEBRING FL 33872
TITLE	D <input checked="" type="checkbox"/> DELETE	2.1 TITLE	President-Elect <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BORING, LINDA W	2.2 NAME	howell J. Fricker Jr
STREET ADDRESS	2359 US 27 S	2.3 STREET ADDRESS	2523 US 27 South
CITY-ST-ZIP	SEBRING FL	2.4 CITY-ST-ZIP	AVON PARK FL 33825
TITLE	D <input checked="" type="checkbox"/> DELETE	3.1 TITLE	Vice President/Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FRICKER, LOWELL J JR.	3.2 NAME	Terri Otterman
STREET ADDRESS	2023 U.S. 27 SOUTH	3.3 STREET ADDRESS	2617 US 27 South
CITY-ST-ZIP	SEBRING FL	3.4 CITY-ST-ZIP	Sebring FL 33870
TITLE	VPD <input checked="" type="checkbox"/> DELETE	4.1 TITLE	Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARABEL, STEVE	4.2 NAME	Perry W. Carter
STREET ADDRESS	2359 US 27 S	4.3 STREET ADDRESS	1911 Flower Terr
CITY-ST-ZIP	SEBRING FL	4.4 CITY-ST-ZIP	Sebring FL 33872
TITLE	EO <input checked="" type="checkbox"/> DELETE	5.1 TITLE	Association Executive <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FULCHER, LYNDA D	5.2 NAME	Debra A. Marine
STREET ADDRESS	3200 US 27 S	5.3 STREET ADDRESS	3200 US 27 South
CITY-ST-ZIP	SEBRING F	5.4 CITY-ST-ZIP	Sebring FL 33870
TITLE	<input checked="" type="checkbox"/> DELETE	6.1 TITLE	Treasurer/Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	Doris Denton
STREET ADDRESS		6.3 STREET ADDRESS	363 US 27 South
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Sebring FL 33870

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.

SIGNATURE Debra A. Marine DATE 3-13-98

CR2E037 (10/97)