


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 03, 2006 8:00 am**  
**Secretary of State**

04-03-2006 90377 024 \*\*\*\*70.00

<b>DOCUMENT # 735897</b>	
1. Entity Name <b>HIGHLANDS ASSOCIATION OF REALTORS, INC.</b>	

Principal Place of Business <b>815 US 27 SOUTH SEBRING, FL 33870 US</b>	Mailing Address <b>815 US 27 SOUTH SEBRING, FL 33870 US</b>
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

03272006 Chg-NP CR2E037 (11/05)

4. FEI Number <b>59-1684961</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
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6. Name and Address of Current Registered Agent	
<b>BURKE, ARIANNA J 815 US 27 SOUTH SEBRING, FL 33870</b>	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
<b>FL</b>	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 _____	DATE _____
<small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reissuing.)</small>	

<b>Filing Fee is \$61.25 Due by May 1, 2006</b>	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>	<b>Make check payable to Florida Department of State</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PPD CARTER, PERRY W 1843 US 27 SOUTH SEBRING, FL 33870 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRES BOCK, TERESA 2617 US 27 SOUTH SEBRING, FL 33870 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WOOD, JAMES W JR 1753 US 27 S SEBRING, FL 33870 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AE BURKE, ARIANNA J 815 US 27 SOUTH SEBRING, FL 33870 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARTER, Perry W. 1843 US 27 North SEBRING, FL 33870 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Robert Tautman 3750 US 27 North SEBRING, FL 33870 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LINDA BORING 809 US 27 South SEBRING, FL 33870 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GAYLE LABANOWITZ 1843 US 27 North SEBRING, FL 33870 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PE Debra Williams 809 US 27 South SEBRING, FL 33870 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JEAN ECKMAN 1843 US 27 North SEBRING, FL 33870 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 	Date: <b>3-27-06</b>	Daytime Phone #: <b>863-385-6014</b>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		

# ATTACHMENT

60024353

#735897

Document # 735897 Continuation of officers and directors

PP addition  
Robert Hesselink  
2617 US 27 South  
Sebring, FL 33870

D addition  
Dawn Dell  
107 Circle Park Drive  
Sebring, FL 33870

D addition  
Richard Martin  
7414 CR 17 South  
Sebring, FL 33876

D addition  
Kathy Godwin  
1564 US 98  
Lorida, FL 33857

D addition  
Phil May  
598 US 27 North  
Avon Park, FL 33825

D addition  
John Gross  
206 North 6<sup>th</sup> Avenue  
Wauchula, FL 33873