

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 06, 1999 8:00 am
Secretary of State

04-06-1999 90014 049 ***150.00

DOCUMENT # 823331

1. Corporation Name

HIGHLINES CONSTRUCTION COMPANY, INC.

Principal Place of Business

701 BRIDGE CITY AVENUE
WESTWEGO LOUISIANA 70094

Mailing Address

PO BOX 408
WESTWEGO LOUISIANA 70096
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/02/1969

4. FEI Number

72-0679822

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, 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

☒ DELETE

TITLE P
NAME CARROLL, DON
STREET ADDRESS 165 HIBISCUS PL
CITY-ST-ZIP NEW ORLEANS LA

TITLE ST
NAME ROWELL, J.R. (ASS'T)
STREET ADDRESS 3504 JAMES
CITY-ST-ZIP METAIRIE LA

TITLE DC
NAME HUGHES-DEPASS, ELIZABETH
STREET ADDRESS 5801 CITRUS BLVD
CITY-ST-ZIP HARAHAN LA

TITLE S
NAME KIHNEMANN, VICKI
STREET ADDRESS 405 LASALLE DR
CITY-ST-ZIP RIVER RIDGE LA 70123

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change

☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

P
ROWELL, JOE R
3504 JAMES DR
METAIRIE LA 70003

D/C
HUGHES, H. DANIEL II
52 HERMITAGE DR
HARRERO LA 70072

S/T
KIHNEMANN, VICKI
405 LASALLE DR
RIVER RIDGE LA 70123

ASST SEC/CONTROLLER
KRUG, ANDREA
5003 MT WHITNEY DR
HARRERO LA 70072

☐ Change

☐ Addition

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 607, 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:

Andrea Krug
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
CONTROLLER

3/30/99 (504)436-3961
Date Daytime Phone #

CR2E034 (1/98)