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FILED

Apr 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F93000005257 (1)

1. Corporation Name

J.D. HIGHLAND, INCORPORATED

Principal Place of Business

528 W. GARDEN ST.
SUITE 1&2
PENSACOLA FL 32501

Mailing Address

528 W. GARDEN ST.
SUITE 1&2
PENSACOLA FL 32501-4700

3. Date Incorporated or Qualified

11/18/1993

3a. Date of Last Report

04/04/1996

4. FEI Number

72-0992791

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 2442 Executive Plaza Rd

Suite, Apt. #, etc.

22

City & State

23 Pensacola, FL

Zip

24 32504

Country

2a. Mailing Address

26 2442 Executive Plaza Rd

Suite, Apt. #, etc.

27

City & State

28 Pensacola, FL

Zip

29 32504

Country

30

9. Name and Address of Current Registered Agent

MCBRIDE, WILLIAM C
528 W. GARDEN ST.
SUITE 2
PENSACOLA FL 32501

→ Address change
only, no Agent
change.

10. Name and Address of New Registered Agent

81 Name

McBride, William C.

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

2442 Executive Plaza Rd

83

84 City

Pensacola

FL

85

Zip Code

32504

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

NAME

STREET ADDRESS

CITY - ST - ZIP

DPCE
MCBRIDE, WILLIAM C
528 W. GARDEN ST.
PENSACOLA FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

STD
MCBRODE, KATHLENN
528 W. GARDNER STREET
PENSACOLA FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

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

DPCE
McBride, William C.
2442 Executive Plaza Rd
Pensacola, FL

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

STD
McBride, Kathleen
2442 Executive Plaza Rd
Pensacola, FL

☒ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do 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.

SIGNATURE:

William C. McBride

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)