

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G61103

FILED  
Jan 24, 2009  
Secretary of State

Entity Name: HIGHLANDS MOBILE HOME PARK & SALES, INC.

**Current Principal Place of Business:**

% JORGE A. QUIROGA  
17730 US HIGHWAY 27, LOT 6  
CLERMONT, FL 34711 US

**New Principal Place of Business:**

**Current Mailing Address:**

% JORGE A. QUIROGA  
17730 US HIGHWAY 27, LOT 6  
CLERMONT, FL 34711 US

**New Mailing Address:**

% JORGE A. QUIROGA  
623 LINDEN ST.  
CLERMONT, FL 34711 US

FEI Number: 59-2329687

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

QUIROGA, JORGE A.  
17730 US HWY 27  
CLERMONT, FL 34711 US

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

QUIROGA, JORGE A.  
623 LINDEN ST.  
CLERMONT, FL 34711 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: JORGE A. QUIROGA

01/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPT ( ) Delete  
Name: QUIROGA, JORGE A.,  
Address: 17730 US HWY 27  
City-St-Zip: CLERMONT, FL 34711

Title: S ( ) Delete  
Name: QUIROGA, VICTORIA  
Address: 17730 US HIGHWAY 27, LOT 6  
City-St-Zip: CLERMONT, FL

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

Title: DPT (X) Change ( ) Addition  
Name: QUIROGA, JORGE A.,  
Address: 623 LINDEN ST.  
City-St-Zip: CLERMONT, FL 34711

Title: S (X) Change ( ) Addition  
Name: QUIROGA, VICTORIA  
Address: 623 LINDEN ST.  
City-St-Zip: CLERMONT, FL

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VICTORIA QUIROGA

S

01/24/2009

Electronic Signature of Signing Officer or Director

Date