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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 31 1997 8:00am

Secretary of State

THOMAS R. ESPOSITO TREAMER 47/77 (717) 293-4444

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K72653

(4)

HIGH ASSOCIATES, INC.

SIGNATURE:

Principal Place of Business Mailing Address 1853 WILLIAM PENN WAY P O 60X 10008 LANCASTER PA 17605 LANCASTER PA 17605-0008							
US		US			3, Date Incorporated or Qualified 03/14/1989	3a. Date of Last 02/05/1996	•
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
21	n	26			52-1621756		Not Applicable
Suite, Apt	#, CIC.	Suito, Apt. #, etc.			5. Certificate of Status Desired	7 -	Additional Required
City & Stat	ic	City & State			Election Campaign Financing Trust Fund Contribution		O May Be d to Fees
Zip	Country	Zip	Countr	y	8. This corporation has liability fo		
24	25	29	30		Florida Statutes	Yes 🗌 No	
	9. Name and Address of Curre	nt Registered Agent		T .:	10. Name and Address of New R	egistered Agent	
	CORPORATION SYSTEM		61	Name			
1200 S. PINE ISLAND ROAD			82 Street		fress (P.O. Box Number is Not Accepta	iple)	
PLA	NTATION FL 33324		83				
					·		
			84	- 7	poration submits this statement for the ation's board of directors. I hereby acc		p Code
SIGNATURE.	·	D DIRECTORS	13.	ent signature requ	uired when reinstating) ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECTO	
Hit	D HIGH, CALVIN G.	DELETE	1.1 TITLE			LJ Change	3 LJ Addition
NAME STREET ADDRESS	1853 WILLIAM PENN WAY		1.2 NAME	T ADDRESS			
CITY-S1-7IP	LANCASTER PA		1.4 CHY-				
1/LF	D DELETE		21 TITLE	<u> </u>	Change L		e Addition
NAME	HIGH, S. DALE		22 NAME				
STREET ADDRESS	1853 WILLIAM PENN WAY		2 3 STREE	T ADDRESS	·		
CITY-ST-ZiF	LANCASTER PA		2. 4 DITY	ST-ZIP			1 . 100
TITLE	D POOLED FORMADD O	☐ DELETE	3.1 TITLE			es 🗀 Chang	e L. Addition
NAME	HOOVER, EDWARD S. 1853 WILLIAM PENN WAY		3.2 NAME				
STREET ADDRESS	LANCASTER PA		3.4. CITY	T ADDRESS			
COLY-ST-ZII TITLE	T	DELETE	4.1 TITLE	31-21		Chang	e Addition
NAME	ESPOSITO, THOMAS R		4. 2 NAME				
STREET ADORESS	1853 WILLIAM PENN WAY		4.3 STREE	T ADDRESS			
CHY-ST-ZIP	LANCASTER PA		4.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	5 1 TITLE			☐ Chang	e 🔲 Addition
NAME			5.2 NAME				
STREET ADDRESS				T ADDRESS		•	
CITY - ST - ZIP TITLE		DELETE		ST-ZIP		Chang	e Addition
NAME		C) Decemb	6.1 TITLE 6.2 NAME			L.J Onling	
STREET ADDRESS				T ADDRESS			
C-TY - ST- ZIP			6.4 CITY				
14. I do here	by certify that the information supplie	ed with this filing does not qua	lify for the ex	emotion state	ed in Section 119.07(3)(i), Florida Statu	tes. I further certify th	at the
informatio	on indicated on this annual report or	supplemental annual report is in the receiver or trustee empo	true and acc	urate and the	at my signature shall have the same legort as required by Chapter 607, Florida	gal effect as if made i	under oath; th