

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

03-07-2008 90224 030 \*\*\*138.75  
L06000087473

DOCUMENT # L06000087473

1. Entity Name  
HIGH FLIGHT INVESTMENT GROUP, LLC



Principal Place of Business  
320 NW 3RD AVENUE  
OCALA, FL 34475

Mailing Address  
POST OFFICE BOX 159  
OCALA, FL 34478

**FILED**  
03 JUL 30 PM 2:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02282008 Chg-LLC CR2E083 (12/06)

4. FEL Number

20-5557114

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JOHN, PICCIN  
320 NW THIRD AVENUE  
OCALA, FL 34475

Name

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

City

FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

Make check payable to  
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGR ☐ Delete  
NAME PICCIN, JOHN  
STREET ADDRESS 320 NW THIRD AVENUE  
CITY-ST-ZIP Ocala, FL 34475

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE MGRM ☐ Delete  
NAME PICCIN, MARY  
STREET ADDRESS 320 NW THIRD AVENUE  
CITY-ST-ZIP Ocala, FL 34475

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE MGRM ☐ Delete  
NAME PICCIN, TIMOTHY  
STREET ADDRESS 320 NW THIRD AVENUE  
CITY-ST-ZIP Ocala, FL 34475

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE MGRM ☐ Delete  
NAME GLYNN, KATIE  
STREET ADDRESS 320 NW THIRD AVENUE  
CITY-ST-ZIP Ocala, FL 34475

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Katherine T. Glynn  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

2/28/08 (352) 208-7775  
Date Daytime Phone #