

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010632

FILED  
May 01, 2005  
Secretary of State

**Entity Name:** HIGMAN SOYRING FOUNDATION, INC.

**Current Principal Place of Business:**

100 1ST AVE SOUTH #315  
ST PETERSBURG, FL 33701

**New Principal Place of Business:**

123 LAREDO WAY NE  
ST PETERSBURG, FL 33704

**Current Mailing Address:**

100 1ST AVE SOUTH #315  
ST PETERSBURG, FL 33701

**New Mailing Address:**

123 LAREDO WAY NE  
ST PETERSBURG, FL 33704

**FEI Number:** 20-1894368      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

CAMPBELL, AMELIA M  
501 E KENNEDY BLVD SUITE 1700  
TAMPA, FL 33602 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: HIGMAN, DENICE R  
Address: 100 1ST AVE SOUTH #315  
City-St-Zip: ST PETERSBURG, FL 33701

Title: D ( ) Delete  
Name: HIGMAN, DAVID A  
Address: 100 1ST AVE SOUTH #315  
City-St-Zip: ST PETERSBURG, FL 33701

Title: D ( ) Delete  
Name: HIGMAN, LUCAS D  
Address: 100 1ST AVE SOUTH #315  
City-St-Zip: ST PETERSBURG, FL 33701

Title: D ( ) Delete  
Name: HIGMAN, ADAM W  
Address: 100 1ST AVE SOUTH #315  
City-St-Zip: ST PETERSBURG, FL 33701

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DENICE R. HIGMAN

D

05/01/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date