2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011609

FILED Apr 09, 2009 Secretary of State

Entity Name: HIGHLANDER RIDGE FELLOWSHIP, INC.

Current Principal Place of Business: New Principal Place of Business:

1115 S LAKESHORE BLVD 5636 LAKESIDE DR LAKE WALES, FL 33853 LAKE WALES, FL 33898

Current Mailing Address: New Mailing Address:

23781 US HWY 27 #408 23781 US HWY 27

LAKE WALES, FL 33859 #408

LAKE WALES, FL 33859

FEI Number: 03-0574276 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

THOMPSON, KEITH
1115 S LAKESHORE BOULEVARD

THOMPSON, KEITH
5636 LAKESIDE DR

LAKE WALES, FL 33853 US LAKE WALES, FL 33898 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: KEITH THOMPSON 04/09/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: P () Delete Title: P (X) Change () Addition

 Name:
 THOMPSON, KEITH
 Name:
 THOMPSON, KEITH

 Address:
 1115 S LAKESHORE BLVD
 Address:
 5636 LAKESIDE DR

 City-St-Zip:
 LAKE WALES, FL 33853
 City-St-Zip:
 LAKE WALES, FL 33898

Title: T () Delete Title: () Change () Addition

 Name:
 PIPPIN, ROBERT
 Name:

 Address:
 5636 LAKESIDE DR
 Address:

 City-St-Zip:
 LAKE WALES, FL 33898
 City-St-Zip:

Title: S () Delete Title: S (X) Change () Addition

 Name:
 BEAMER, B.J.
 Name:
 BEAMER, B.J.

 Address:
 326 MARIETTA ST
 Address:
 5636 LAKESIDE DR

 City-St-Zip:
 LAKE WALES, FL 33853
 City-St-Zip:
 LAKE WALES, FL 33898

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

SIGNATURE: ROBERT PIPPIN T 04/09/2009