

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
\$35.00				

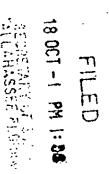




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COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: Highlands Group Home, Inc				
Name of Corporation				
DOCUMENT NUMBER: N11357				
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Tonja Weed				
Name of Contact Person				
Highlands Group Home, Inc				
Firm/Company				
4352 Independence St				
Address				
Avon Park, FL 33825				
City/State and Zip Code				
tweed@ridgeareaarc.org ,/				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Tonja Weed Name of Contact Person				
Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed is a \$35.00 check made payable to the Department of State.				
Mailing Address: Street Address:				
Amendment Section Amendment Section Division of Corporations Division of Corporations				
P.O. Box 6327 Clifton Building				

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.050. inge is submitted for a corporation organ ir to change its registered office or registe	ized under the laws of the State of \underline{f}	Florida	
1. The name of	the corporation: Highlands Group Hoffice address: 4352 Independence	Home, Inc.		
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: Sept. 30, 198	Document number: N1135	7	
	I street address of the current registered at tment of State: (If resigned, enter resigned	-	th the	
	Rhonda Beckman			
	4352 Independence St		18 OCT	
	Avon Park, FL 33825		A PE	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
	Kathleen Border		ë	
4352 Independence St				
	Avon Park, FL 33825	acceptable		
The street address changed will	ess of its registered office and the street a be identical.	address of the business office of its	registered agent,	
Such change wa authorized by th	as authorized by resolution duly adopted ne board, or the corporation has been not	by its board of directors or by an citied in writing of the change.	officer so	
Mon	re of an officer or director	Donna Doubleday		
I hereby accept I further agree of performance of agent, Or, if the	the appointment as registered agent and to comply with the provisions of all statumy duties, and I am familiar with and act is document is being filed merely to reflet that the corporation has been notified in	l agree to act in this capacity, ites relative to the proper and com- eccept the obligation of my position rct a change in the registered office	plete as registered	
Millet	Freel	September 19, 2018		
/	hature of Registered Agent	Date	- 1	
,	half of an entity:			
Kathleen Be	ped or Printed Name			

* * * FILING FEE: \$35.00 * * *