

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 17, 2007 08:00 AM
Secretary of State**

DOCUMENT # N17022

1. Entity Name
HIGHLANDS RADIO CONTROL CLUB, INC.



Principal Place of Business
**2308 DOG LEG DRIVE
SEBRING, FL 33872 US**

Mailing Address
**2308 DOG LEG DRIVE
SEBRING, FL 33872-1620 US**



01092007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2731624

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**RHOADES, CLIFFORD R.
227 N. RIDGEWOOD DR.
SEBRING, FL 33870**

**DO NOT WRITE
IN THIS SPACE**

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 _____

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

**000000589176
01/18/07-80005-003 61.25**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPD
HILINSKI, JOSEPH
2605 LAZY DAYS LANE
SEBRING, FL 33872**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
WELBORN, JIM
4515 BUNKER DR
SEBRING, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
MESSER, JAMES
4344 DUFFER LOP
SEBRING, FL 33872**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
GROEZINGER, F.H.
2308 DOG LEG DRIVE
SEBRING, FL 33872**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. 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 or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: F.H. GROEZINGER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN 10, 2007 863-471-0145
Date Daytime Phone #