2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001762

FILED Jan 26, 2009 Secretary of State

Entity Name: KEEP HIGHLANDS COUNTY BEAUTIFUL, INC.

Current Principal Place of Business: New Principal Place of Business: 6000 SKIPPER ROAD 6000 SKIPPER ROAD SEBRING, FL 33870 SEBRING, FL 338765951 US US **Current Mailing Address:** New Mailing Address: 6000 SKIPPER ROAD 6000 SKIPPER ROAD SEBRING, FL 33870 US SEBRING, FL 338765951 US FEI Number: 65-0580849 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: COOPER, SHERRI L COOPER, SHERRI L 6000 SKIPPER ROAD 6000 SKIPPER ROAD US SEBRING, FL 338765951 US SEBRING, FL 33870 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: SHERRI L. COOPER 01/26/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: VPD () Delete () Change () Addition COLLIER, TERRY Name: Name: 3207 KENILWORTH BLVD Address: Address: City-St-Zip: SEBRING, FL 33870 City-St-Zip: Title: () Delete Title: () Change () Addition PYRE, THELMA Name: Name: Address: 8605 CORMORANT POINT Address: City-St-Zip: SEBRING, FL 33872 City-St-Zip: Title: () Delete Title: () Change () Addition ROBERTS, MICHELLE Name: Name: 1481 LAKE LOTELA DR Address: Address: City-St-Zip: AVON PARK, FL 33825 City-St-Zip: Title: () Delete Title: () Change () Addition Name: SUTHRLAND, MARIA Name: Address: 110 E MAIN ST Address: AVON PARK, FL 33825 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition ROBERTS, MICHELE Name: Name: 1481 LAKE LOTELA DR. Address: Address: City-St-Zip: AVON PARK, FL 33825 City-St-Zip: Title: () Delete Title: () Change () Addition REED. CHRISTY Name: Name: 6000 SKIPPER RD Address: Address: SEBRING, FL 338765951 City-St-Zip: City-St-Zip:

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: MARIA SUTHERLAND MS. 01/26/2009