

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N96000000240 (9)

1. Corporation Name

HIGHLANDAIRES BIG BAND, INC.



Principal Place of Business

Mailing Address

2011 JACKSON HEIGHTS DRIVE
SEBRING FL 33870

2011 JACKSON HEIGHTS DRIVE
SEBRING FL 33870

3. Date Incorporated or Qualified

11/22/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

65-0625063

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MCCOLLUM, JAMES F
129 S COMMERCE AVENUE
SEBRING FL 33870

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE
NAME GARDNER, HARVEY
STREET ADDRESS 3829 GOLFVIEW ROAD
CITY - ST - ZIP SEBRING FL 33872

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE VD ☐ DELETE
NAME DUBBS, STUART
STREET ADDRESS 1780 N SYOSSET
CITY - ST - ZIP AVON PARK FL 33825

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE STD ☐ DELETE
NAME SPEIGHT, FRANK
STREET ADDRESS 2011 JACKSON HEIGHTS DRIVE
CITY - ST - ZIP SEBRING FL 33870

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE D ☒ DELETE
NAME STAEDLIN, JOE
STREET ADDRESS 2105 SE 8TH AVENUE
CITY - ST - ZIP OKEECHOBEE FL 33472

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME DAVID NAYLOR
4.3 STREET ADDRESS 2800 SOUTH DRIFTWOOD CT
4.4 CITY - ST - ZIP AVON PARK, FL 33825

TITLE D ☐ DELETE
NAME HOPPEN, IRV
STREET ADDRESS 657 BUTTWOOD DRIVE
CITY - ST - ZIP SEBRING FL 33872

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FRANK SPEIGHT

Date

April 6, 1996

Daytime Phone #

941-385-7117

CR2E037 (12/95)