FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1997

DOCUMENT #

N9600000240 (9)

HIGHLANDAIRES BIG BAND, INC.

FILED Feb 13 1997 8:00am Secretary of State



Principal Place of Business Mailing Address					,		DIŅ EBAN OPAN ODA		JEN 1411 1301	
2011 JACKSON HEIGHTS DRIVE 2011 JACKSON HEIGHTS (SEBRING FL 33870 SEBRING FL 33870-7310										
						3. Date Incorporated or Qualified 11/22/1995	3a. Date of 04/1	Last Re 0/199		
2. Principal P	lace of Business	2a. Mailing	Address			4. FEI Number	·	Ap	plied For	
21		26				65-0625063			t Applicable	
Suite, Apt.		27				5. Certificate of Status Desired \$8.75 Additional Fee Required				
City & State 23		28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip				ountry	The corporation has habiting for the light					
24	9. Name and Address of	29	30			Florida Statutes Yes No 10. Name and Address of New Registered Agent				
	9, Hallie allo Adoless o	Content negistered Ag	71 IL	81	Name	10. Rame and Address of New Re	istereo Agent			
MCCOLL	LUM, JAMES F			82			·			
	OMMERCE AVENUE				Street Add	ress (P.O. Box Number is Not Acceptable)				
	G FL 33870									
020				0.4	City			m:		
				84	City		FL 85	Zip C		
11. Pursuant i office or ri agent. I a	to the provisions of Sections egistered agent, or both, in the m familiar with, and accept the	617.0502 and 617.1508, he State of Florida. Such the obligations of, Section	florida Statutes, the change was authori. 617.0503, Florida S	above zed by tatute:	e-named cor the corpora s.	poration submits this statement for the pation's board of directors. I hereby accept	urpose of chan t the appointme	ging its ant as	s registered registered	
SIGNATURE							•			
Signature, typed or printed name of registered agent and title if applicable (NOTE: Re					int signatura requ	dred when reinstating)	DATE			
12.	PD	ERS AND DIRECTORS	DELETE 1.1	S. I TITLE		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRE		S IN 12	
NAME	GARDNER, HARVEY	Ļ		2 NAME	1		v	rei ny o		
STREET ADDRESS	3829 GOLFVIEW ROAL	D			ADDRESS					
CITY-ST-ZIP	SEBRING FL 33872	-		CITY - S						
TITLE	VD OV			TITLE			☐ C	nange	Addition	
NAME	DUBBS, STUART		2.2	NAME						
STREET ADDRESS	1780 N SYOSSET		2.3	STREET	ADDRESS				1	
CITY-ST-ZIP	AVON PARK FL 33825			4 CITY-	ST-ZIP	:				
TITLE	STD	L	DELETE 3.1	TITLE				nange	Addition	
NAME	SPEIGHT, FRANK			NAME						
STREET ADDRESS	2011 JACKSON HEIGH	HIS DRIVE			ADDRESS					
CITY-ST-ZIP TITLE	SEBRING FL 33870			I. CITY-S I TITLE	ST-ZIP		[] [0]		1.400	
NAME	D Naylor, David	L	-	2 NAME			니	nange .	Addition	
STREET ADORESS	2800 S DRIFTWOOD C	יי			ADDRESS	•	•			
CITY-ST-ZIP	AVON PARK FL) (I CITY-S						
TITLE	D		1 0.0. 000	TITLE	1 - ZH		□ C	nanoe	Addition	
NAME	HOPPEN, IRV			NAME						
STREET ADDRESS	657 BUTTONWOOD D	RIVE			ADDRESS					
CITY-ST-ZIP	SEBRING FL 33872			CITY-S						
TITLE		L		TITLE			□ ci	nange	Addition	
NAME			6.2	NAME	}					
STREET ADDRESS			6.3	STREET	ADDRESS	T.				
CITY-ST-ZIP				CITY-S						
14. Ldo hereb	by certify that the information.	supplied with this filing d	see not applify for th		mation state	d in Section 110 07/3Vi). Florida Statutos	I durther portif	. that t	ha	

Too needy early that the information supplied with this hing does not quality to the exemption stated in oscillar 115.07.05(1), Florida statutes. Therefore 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.