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Feb 05 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

4. FEI Number

65-0625063

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

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

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current 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

10. Name and Address of New Registered Agent

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

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

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

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

TITLE **D** ☐ DELETE
NAME **NAYLOR, DAVID**
STREET ADDRESS **2800 S DRIFTWOOD CT**
CITY-ST-ZIP **AVON PARK FL**

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

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

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

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

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

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

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Frank Speight **FRANK SPEIGHT**

Jan 24 1998 **941-385-7117**

CR2E037 (10/97)