

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2003 8:00 am
Secretary of State

02-26-2003 90167 034 ***150.00

DOCUMENT # P00000068074

1. Entity Name
HIGHLANDS VILLAGE, INC.



Principal Place of Business

**2301 US 27 S
SEBRING FL 33870**

Mailing Address

**60 NE 3RD STREET
FORT LAUDERDALE FL 33301-1042**

2. Principal Place of Business

3. Mailing Address

P.O. Box 5651

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

FT. LAUD., FL

Zip

Country

33310

Country

USA

4. FEI Number **65-1026208**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**DORER, ERIC J ESQ
30 NE 3RD STREET
FORT LAUDERDALE FL 33301-1042**

7. Name and Address of New Registered Agent

Name **HARVEY LAMPERT**
Street Address (P.O. Box Number is Not Acceptable)
1960 N.W. 29th STREET
City **FT. LAUDERDALE, FL** Zip Code **33311**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2/24/2003

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Delete
NAME **DORER, ERIC J**
STREET ADDRESS **30 NE 3RD STREET**
CITY-ST-ZIP **FORT LAUDERDALE FL 33301-1042**

TITLE **D.P.** ☐ Delete
NAME **HARVEY LAMPERT**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D.P.** ☐ Change ☒ Addition
NAME **HARVEY LAMPERT**
STREET ADDRESS **1960 N.W. 29th STREET**
CITY-ST-ZIP **FT. LAUDERDALE, FL 33311**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

12. 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 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 607, 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: **HARVEY LAMPERT** **2/24/03** **954-467-1224**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)