2006 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Jan 20, 2006 08:00 AM DOCUMENT # P01000050387 Secretary of State 1. Entity Name HIGHLANDS ENHANCEMENT, INC. Principal Place of Business Mailing Address 5431 US HWY, 98 SOUTH P. O. BOX 237 HIGHLAND CITY, FL 33846 HIGHLAND CITY, FL 33846 A Section CR2E034 (11/05) 01162006 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3721181 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MCCLURE, E.V. ESQ. DO NOT WRITE 101 S. FLORIDA AVE. LAKELAND, FL 33801 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME ROGERS, OSCAR W STREET ADDRESS 5431 US HWY. 98 SOUTH CITY-\$7-21P HIGHLAND CITY, FL 33846 Cag TITLE TRAILPERINGER ROGERS, C DANE 01/24/UE 80051-002 150.00 NAME STREET ADDRESS 5105 LAKELAND HIGHLAND RD CITY-ST-ZIP LAKELAND, FL 33813 VD TITLE WILLIAM, ROGERS T 4740 LAKE HANCOCK STREET ADDRESS DO NOT WRITE LAKELAND, FL 33813 TITLE IN THIS SPACE NAME ROGERS, JOHN S STREET ADDRESS 4620 LAKE HANCOCK RD CITY-ST-ZIP LAKELAND, FL 33813 TITLE NAME STREET ADDRESS

12. Thereby certify that the information supplied with this litting does not qualify for the exemptions contained 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 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:

CITY-ST-ZIP TITLE NAME STREET ADDRESS. Cfty-St-Zip

C. Dane Rogers, Pres. 1/16/06 1-863-646-518