## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPEDOR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## **FILED** Jun 17, 2005 8:00 am Secretary of State

1. Entity Name HIGHLAND BEACH REAL ESTATE, INC.					)	06-17-2005	90003 0	40 ***15	50.00	
Principal Place of Business 2727 S. OCEAN BLVD., #602			Mailing Address 2727 S. OCEAN BLVD., #602			_				
HIGHLAND BE	EACH, FL 33	3487	HIGHLAND BEACH, FI	L 3348/			ROLDE CIDIN DETILI COLITI DETILI	<b>.</b> E140 (9610 40)	it 18111 88188 191	SIATI 11 IATI
2. Principal Place of Business			3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			03212005	Chg-P	CR2E03	34 (10/03)	
City & State			City & State		4. FEI Numbe 59-1715			<del></del>	pplied For of Applicable	
Zíp		Country	Zip	Cour	ntry	5. Certificate of	of Status Desired		8.75 Add ee Required	
	6. Name	and Address of Curren	Registered Agent			7. Name and	Address of New Re	gistered A	gent	
BLAKE, JUNE A 2727 S. OCEAN BLVD., #602 HIGHLAND BEACH, FL 33487			Name  Street Address (P.O. Box Number is Not Acceptable)							
					City			FL	Zip Code	е
	named eath		or the purpose of changing		ed office or regist			rida. I am f	amiliar with,	
	E NOW!!! ay 1, 200	Fee will be \$550	- <del></del>	ontribution.	. 🗀 Ác	5:00 May Be —		0570 1115	DIDECTOR	-
10.	D	OFFICERS ANI	D DIRECTORS Defete	11. TIT		AUDITIONS/	CHANGES TO OFFI	CEHS AND	☐ Change	Addition
TITLE NAME	EPPLE, G	LENDA	1 Desete	NAM					crange	
STREET ADDRESS	3212 S O	CEAN BLVD #301A			REET ADDRESS					
CITY-ST-ZIP	HIGHLAN	D BCH, FL 33487		CIT:	Y-\$1-ZIP					
TITLE	D	N DEGGY	☐ Delete	TITL					Change	Addition
NAME STREET ADDRESS	1	N, PEGGY CEAN BLVD #125D		NAM STR	REET ADDRESS					
CITY-ST-ZIP		D BCH, FL 33487		CIT	Y - ST - ZIP					
1ITLE	D		☐ Delete	Titl	LĒ				☐ Change	Addition
NAME	BLAKE, P			NAI	_					
STREET ADDRESS	i .	ONG WAY TON, FL 33487			REET ADDRESS Y+ST-ZIP					
IIILE	D		☐ Delete	m					Change	Addition
NAME	BLAKE, J	UNE	<u> </u>	NA.	ME					
STREET ADDRESS	1	CEAN BLVD #602			REET ADDRESS					
CITY-ST-ZIP	HIGHLAN	D BCH, FL 33487			Y-ST-ZIP				Chross	☐ Addition
NAME	}		Oelete	TIT! NAI					Change	☐ ¥00mon
STREET ADDRESS					REET ADDRESS					
CHY-ST-ZIP	]			CIT	Y-ST-ZIP					
TITLE			☐ Delete	111	LE				Change	Addition
NAME				NAI						
STREET ADDRESS CITY-ST-ZIP					REET ADDRESS Y-ST-ZIP					
	Certify that th	e information supplied <b>4</b>	th this filing does not qualify			Section 119.07(3)(	i), Florida Statutes. I	I further cer	ify that the i	information
indicated of the cor changed	on this reportion or to on an att	rt or supplementer report he receiver or trustee as achment with an active se	th this filing does not qualify is tue and accurate and th powered to execute this rep with all other like empower	at my sign ort as requ ed.	ature shall have th uired by Chapter 6	ne same legal effect 307, Florida Statute	t as if made under os; and that my name	oath; that I a e appears ii	m an officer Block 10 o	r or director or Block 11 if

FEI Number FEI Number Status

Certificate of Status Desired

Election Campaign Financing Trust Fund Contribution

40088511

Current



## **Division of Corporations**

## Annual Report

Document Number P01000099803 Business Entity Name
HIGHLAND BEACH REAL ESTATE, INC.

591715542

Applied For

No

Not Applicable

\$8.75 each

	Principal Place of Business
Address	2727 S. OCEAN BLVD., #602
Suite, Apt. =, etc.	
City, State	HIGHLAND BEACH . FL
Zip Code & Country	33487
	Mailing Address
Address	2727 S. OCEAN BLVD., #602
Suite, Apt. #, etc.	
City, State	HIGHLAND BEACH FL
Zip Code & Country	33487
Mo	me And Address of Registered Agent
Name (Last, First, Middle, Title)	
-or- RA Business Name	
Address	2727 S. OCEAN BLVD., #602
Suite, Apt. #, etc.	2727 0. 0027((0220), (002
City, State	HIGHLAND BEACH FI
-	20407
Zip Code & Country	
in the 'Registered Agen registered agent. RA signar	stered agent, the new agent will need to type their name t Signature' block below to accept the designation of ture must be an individual name. If the RA is a business ign on their behalf. A business entity cannot serve as its own RA.
Registered Agent Sig	gnature
This signature must be that of the inc knowledge and permission of the indi	
(	Officer/Director Name And Address
Title	D
e sunhiz org/scrints/uhr001	eve

orporations	ATTACHMENT 40088511	Page
	# PO 1000099 803	
Name (Last, First, Middle, Title)	EPPLE GLENDA	
-or- Entity Name	·	
Street Address	3212 S OCEAN BLVD #301A	
City, State	HIGHLAND BCH FL	
Zip Code & Country	33487	
Title	D	
Name (Last, First, Middle, Title)	MCGAHAN PEGGY	
-or- Entity Name		
Street Address	3100 S OCEAN BLVD #125D	
City, State	HIGHLAND BCH FL	
Zip Code & Country	33487	
Title	D	
Name (Last, First, Middle, Title)	BLAKE PATTY	
-or- Entity Name		
Street Address	3953 REDONG WAY	
City, State	BOCA RATON FL	
Zip Code & Country	33487	
Title	D	
Name (Last, First, Middle, Title)	BLAKE JUNE	
-or- Entity Name		
Street Address	2727 S OCEAN BLVD #602	
City, State	HIGHLAND BCH FL	
Zip Code & Country	33487	
Title		
Name (Last, First, Middle, Title)		
-or- Entity Name		
Street Address		
City. State		
Zip Code & Country		
Title		
Name (Last, First, Middle, Title)		
-or- Entity Name		
Street Address		

Division of Corporations	ATTACHMENT	0088511 Page 3 of 3
City, State  Zip Code & Country	HIGHLAND BEACH:	8)000099803 FL
of an entity na	I named above or an individual sign amed above must type their name in ctor Signature' block below. A corpon this block.	the .
knowledge and permission of the it	be individual "signing" the document electronically of ndividual, otherwise it the strute forgery under s.83 ng" this document affirms that the facts stated herein Continue Reset	1.06, Florida Statutes. The

Start Over

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**Annual Report Help**