2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2005
Secretary of State

DOCUMENT# P03000105647

Entity Name: HIGHLANDER ROCK, INC.

Current Principal Place of Business:

415 HAMDEN DRIVE
CLEARWATER, FL 337672537

New Principal Place of Business:

Current Mailing Address:

415 HAMDEN DRIVE
CLEARWATER, FL 337672537

New Mailing Address:

FEI Number: 56-2409335 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

O PACIAN, JACK
415 HAMDEN DRIVE
CLEARWATER, FL 337672537 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	OPACIAN, JACK	
Address:	415 HAMDEN DRIVE	
City-St-Zip:	CLEARWATER, FL 33767	
Title:	TD	( ) Delete
Name:	OPACIAN, ANNA	
Address:	415 HAMDEN DRIVE	
City-St-Zip:	CLEARWATER, FL 33767	
Title:	VD	( ) Delete
Name:	SZCZECHULA, WALTER	
Address:	7258 ARBOR LANE	
City-St-Zip:	JUSTICE, IL 60458	
Title:	VD	( ) Delete
Name:	SZCZECHULA, STELLA	
Address:	7258 ARBOR LANE	
City-St-Zip:	JUSTICE, IL 60458	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANNA OPACIAN TD 04/11/2005

Electronic Signature of Signing Officer or Director — Date