## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 21, 2006 8:00 am Secretary of State

DOCUMENT # P04000111047  1. Entity Name HIGHLAND PROFESSIONAL PILOTS GROUP, INC.					03-21-2006 90015 045 ***150.00					
Principal Plac	ce of Business	Mailing Address			<b></b> -					
4807 GRANA	•	4807 GRANADA BLVD.								
SEBRING, FL 33872 US		SEBRING, FL 33872 US		J						
					1 18 6 (19 8) 111 61	1111 <b>1</b> 244 1 <b>46</b> 14 1 <b>46</b> 14 1 <b>4</b> 14			!### (  <b>  186</b> )	
2. Principal F	Place of Business	3. Mailing Address		*****						
4713 Calatrava Ave.		4713 Calatrava Ave.		· 0				HEETH BEGIFFEE		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03012006	Chg-P	CDSEAS	4 (11/05)			
					G Ig-F	CRZEUS	·			
City & State Sebring, FL		City & State Sebring, FL		4. FEI Number	000		<b>—</b>	plied For		
Zip Country		Zip Country		20-1423	882			x Applicable		
33872 USA		33872	USA		5. Certificate of	Status Desired		8.75 Add ee Require		
	6. Name and Address of Current	1			7. Name and A	ddress of New R	egistered A	ent		
i '					Name					
MEINERS, LOUIS M JR				Street Address (P.O. Box Number is Not Acceptable)						
SUITE 2										
NAPLES, FL 34104										
•			ļ	City FL Zip Code						
The above named entity submits this statement for the purpose of changing its registered c					tored agent, or both	in the State of Flo		miliar with	and accept	
	tions of registered agent.	in the perpendicular or enteringing its	, rogistore	a omice or regis	icica agent, or oom,	III ti lo Otato Oi i lo	inoa. Termo	Trancal Wight,	and accept	
SIGNATURE										
JIGHATORE.	Signature, typed or printed name of registered agent	and titte if applicable. (NOT	E: Registered	Agent signature requi	red when reinstating)	•	DATE	<del></del>		
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee Will be \$550.	9. Election Campa Trust Fund Conf		cing \$	5.00 May Be dided to Fees					
10.	· OFFICERS AND	DIRECTORS	11.		ADDITIONS/C	HANGES TO OFFI	CERS AND I	DIRECTORS	3 IN 11	
TITLE	Ρ	☐ Delete	TITLE	P	_			Change	Addition	
NAME	<b>1</b>		NAME		Colson, Kevin A					
STREET ADDRESS CITY-ST-ZIP	l		STREE CITY-		4713 Calatrava Ave.					
TITLE	SEBANO, FE 33072	Delete	TITLE	Sel	oring, FL	33872		Change	☐ Addition	
NAME	-	LLJ Detete	NAME					Gaange	LJ Addition	
STREET ADDRESS			STREE	T ADDRESS						
CITY-ST-ZIP			CITY-:	ST-21P						
TITLE		☐ Delete	TITLE				!	Change	Addition	
NAME STREET ADDRESS			NAME							
CITY-ST-ZIP			CITY-	TADDRESS ST-ZIP						
TITLE		☐ Delete	TITLE					Change	☐ Addition	
NAME			NAME							
STREET ADDRESS				T ADORESS						
CITY-ST-ZIP			CITY-	ST-ZIP	<u></u> .	<del> </del>	·····			
TITLE		Delete	TITLE	•			+	Change	Addition	
NAME Street address			NAME	T ADDRESS						
CITY-ST-ZIP			CITY-							
TITLE		☐ Delete	IIILE					Change	Addition	
NAME			NAME					-		
STREET ADDRESS				T ADDRESS						
CITY-ST-ZIP	certify that the information supplied with on this report or supplemental report is moration or the receiver or trustee emoration or the receiver or trustee emoration.		CITY							
TO I DOCODU				motione contain	og in Chapter 110 l	HORIDO STORLEGO	THE CORTIN			

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 eath; 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.