## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9400003612

1. Corporation Name

HIGHLANDS DEVELOPMENT GROUP OF CLERMONT, INC.

## FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90106 034 \*\*\*150.00

							<b>       </b>			
Principal Place	of Business	Mailing Address		_	( )0011001					
1397 W. LAKESHORE DR. 1397 W. LAKESHORE DR. CLERMONT FL 34711 CLERMONT FL 34711										
OCCUMION: 12	\$ 7 7 4		ra v .	· <u>  :</u>			RITE IN THE	S SPACE		
				;	3. Date Incorpo		ed			
					<u>01/14/199</u>	14			_	
2. Principal Pl	lace of Business	2a. Mailing Address 26 200 °C Soo	th us a	7	<ol> <li>FEI Number</li> <li>59-32262</li> </ol>	76		<u>_</u>	plied For t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		- 1	5. Certifcate of	Status Desired		<b>\$8.75</b> A Fee Re		
Oity & State	mont, th	Clermont	, FL		6. Election Carr Trust Fund C		g 🖂	\$5.00 Added t		
Zip	Country		Country		8. This corporat		current vear Ir	ntangible	_	
24 34 7	11 25 U.S.14	29 3 4 7 1 / 30	11 C A.		Personal Pro		,a,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Yes	□No	
24 3 1	9. Name and Address of Current I	<u> </u>	<u> </u>	1	0. Name and A	·	w Registered	d Agent		
			81 Name	<u> </u>		V+	7			
KAR	st, george f Jr		22 21 1	٥٥٥		Karsi	10 r			
1397	82 Street Address (P.O. Box Number is Not Acceptable) Yo Hichlands Development Group of (							'n		
CLE	RMONT FL 34711		83	- (()	7(-0.00)	11	1	<u></u>	<u> </u>	
	,		200	<u> </u>	<u> </u>	<u> </u>	WY 1	- 1	_	
,			84 City /	٦ ١ ٥ -	4		, FI	85   Zip (		
44 D	to the provisions of Sections 607.0502	and 607 1508 Florida Statutae th	a above-named (	corporat	ion submits this	statement for		_	1,,,,	
i office or re	egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida. Such change was author	ized by the corpo	pration's	board of directo	rs. I hereby ac	cept the appo	ointment as re	gistered.	
SIGNATURE	Chat	h George F. K	arst Tr.	(A)	esident		4/21/	ያና		{
	Signature typed or printed name of registered agent a	· · · · · · · · · · · · · · · · · · ·	stered Agent signature re	equired whe		HANCEC TO	DATE OF THE PROPERTY OF THE PR	ND DIRECTO	DS IN 12	ļ ģ
12.	OFFICERS AND		13.		ADDITIONS/C	HANGES 10	OFFICERS A	Change	Addition	3
TITLE	D	_	1.1 πn.E					e onange		
NAME ·	KARST, GEORGE F JR	1	1.2 NAME							2
STREET ADDRESS	1397 W. LAKESHORE DR.	1	1.3 STREET ADDRESS							إ
CITY-\$T-ZIP	CLERMONT FL 34711		1.4 CITY+ST-ZIP					F-101	□ Addition	Ç
TITLE	[D,:	DELETE	2.1 TITLE			•	- *	Change	Addition	`
NAME	`KARST, RANDALL L		2.2 NAME		بر	6 SL.			•	1
STREET ADDRESS	1259 6TH ST.	:	2.3 STREET ADDRESS	13	12 0.	6 St.	247	4.4		
CITY-ST-ZIP	CLERMONT FL 34711		2. 4 CITY-ST-ZIP	CLe	rmen	+	3.17			
TITLE		☐ DELETE :	3.1 TITLE					Change	Addition	
NAME		<b>]</b> ;	3.2 NAME							
STREET ADDRESS		l:	3.3 STREET ADDRESS			÷				
CITY-ST-ZIP		;	3.4. CITY-ST-ZIP		_					
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NAME		1.	4. 2 NAME							
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CITY-ST-ZIP		<b>i</b> .	4.4 CITY-ST-ZIP							
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NAME		9	6.2 NAME							Į
STREET ADDRESS		<b>.</b>	6.3 STREET ADDRESS							
OTTY OT 7/D			6.4 CITY-ST-ZIP							

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: