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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000059994

HIGH MARK DEVELOPMENT GROUP, INC.

					•				
Principal Place of Business Mailing Address									•
1430 VIRGINIA ST 1430 VIRGINIA ST									
DUNEDIN FL 34698 DUNEDIN FL 34698						DO NOT W	DITE IN THIS	SPACE	
US US						DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed			
						08/12/1994	o .		
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		App	olied For
21		26				59-3261600	····		Applicable
Suite, Apt.	Suite, Apt. #, etc.	e, Apt. #, etc.			5. Certifcate of Status Desired		\$8.75 A	_	
22		27						Fee Rec	
City & State	е	City & State	¬ ´			6. Election Campaign Financing	³ 🗆	\$5.00	
23		28				Trust Fund Contribution		Added to	rees
Zíp	Country	Zip	Coun	try		8. This corporation owes the cu	ırrent year Int	angible □Yes	No
24	25	1,7-1	30			Personal Property Tax. 10. Name and Address of New	Ponietorod		(MINO
	9. Name and Address of Curr	ent Registered Agent	— ;	31 Na	me	10. Name and Address of New	Registered	-yent	
GAR	DNER, JOHN C			' '	1116				
311 S MISSOURI AVE				32 Str	eet Addre	ess (P.O. Box Number is Not Acce	otable)		
SUITE 1000			-	33					
CLEARWATER FL 34616				23					
QLL/	ATTAILITE STOIC		1	34 Cit	у		<u> </u>	85 Zip C	ode
							FL		alatarad
office or n	to the provisions of Sections 607.0 egistered agent, or both, in the Sta	le of Florida. Such change was au	ithonzed i	ov the c	ned corpo orporation	pration submits this statement for the n's board of directors. I hereby acc	ept the appoi	cnanging its ntment as rec	jistered
agent. I a	m familiar with, and accept the obli	gations of, Section 607.0505, Flor	ida Statut	es.				_	
SIGNATURE									
	Signature, typed or printed name of registered a	3-11-11-11-11-11-11-11-11-11-11-11-11-11		gent signa	ture required	when reinstating) ADDITIONS/CHANGES TO C	DATE	ID DIBECTO	DS IN 12
12.	OFFICERS.	AND DIRECTORS	13. 1.1 TITL			ADDITIONS/CHANGES TO C	I FIGERS AN	☐ Change	Addition
TITLE	STRONG, ANDY	_ beleit	1.2 NAM						
NAME	2117 ANDREWS CT		1						ļ
STREET ADDRESS			1	EET ADDR	.555				
CITY-ST-ZIP				'-ST-ZIP				Change	Addition
TITLE	DELETE 2.1							C 01/01/30	
NAME		22							ļ
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CITY-ST-ZIP				Y-ST-ZIP	 		*-	Change	Addition
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NAME			3.2 NAM	_					\
STREET ADDRESS				EET ADDR	ESS				
CITY-ST-ZIP		O BELETE		Y-ST-ZIP	-			☐ Change	Addition
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NAME			. 4, 2 NAJ						
STREET ADDRESS			1	EET ADDF	ESS				į
CITY-ST-ZIP				-ST-ZIP	-			☐ Change	Addition
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NAME			1						,
STREET ADDRESS			1	EET ADD	ESS	•			
CITY-ST-ZIP				/-ST-ZIP	-			Change	Addition
TITLE		☐ DELETE	6.1 TITL					Change	
NAME		•	6.2 NAM						•
STREET ADDRESS			6.3 STR	EET ADDF	RESS				

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 or an adacting with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP