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

PROFIT CORPORATION ANNUAL REPORT

1997

TO THE PERSON NAMED IN

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 14 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000092709 (1)

THE HIGHLANDS GROUP INC.

Principal Place of Business 2600 LANTERN LANE NAME NAME NAME NAME NAME NAME NAME NAME		Mailing Address 2600 Lantern Lane Naples FL 34102-7726 US		I (QD) DD 310 32151 D404 QD314 D3111 DB11	BBITE 18110 11811 18811 68118 1811 1881
				3. Date Incorporated or Qualified 12/06/1995	3a. Date of Last Report 04/23/1996
2. Principal Pi 21	lace of Business	2a. Mailing Address 26		4. FEI Number 06-1311866	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Dosired	\$8.75 Additional Fee Required
City & Stato		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country	Zip 33940	Country 30		KYos 🗌 No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Re	gistered Agent
RAKOW, KAREN C 81 Name					
2600 LANTERN LANE NAPLES FL 33940			82 Street Add	ress (P.O. Box Number is Not Acceptat	olo)
			83		
			63		
			84 City		85 Zip Code
11. Pursuant i office or re agent. Lai	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig	02 and 607.1508, Florida Statu e of Florida. Such change was gations of, Section 607.0505, Fl	L. les, the above-named corp authorized by the corporat orida Statutes.	poration submits this statement for the plion's board of directors. I hereby accept	ourpose of changing its registered of the appointment as registered
SIGNATURE					
	Signature, typed or printed name of registered as		IL: Registered Agent signature requi		DATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	DVS	DELFTE	1.1 TOTLE		Change Addition
NAME	RAKOW, KAREN C		1.2 NAME		1
STREET ADDRESS	2600 LANTERN LANE NAPLES FL		1.3 STREET ADDRESS		
CITY-ST-ZIP	PT PT	DELETE	1.4 CHY-S1-ZIF		Change Addition
TITLE	RAKOW, ROBERT	בין טנונונ	2.1 THLE		Change Addition t
NAME	2600 LANTERN LANE		2.2 NAME	·	
STREET ADDRESS	NAPLES FL		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	IMPLESTE	DELFTE	2. 4 CHY-ST-ZIP 3.1 TITLE		Change Addition
NAME			3.2 NAME		El Manion
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - S1 - ZIP		
TITLE		DELETE	4.1 TOLE		Change Addition
NAME		_	4. 2 NAME		
STREET ADDRESS			4.3 STHEET ADDRESS		
CITY-ST-ZIP			4.4 CHY-S1- <i>XI</i> P		
TITLE		☐ DELETE	5.1 TITLE	And Andrews and the second second second second	Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-\$T-ZIP			5.4 CHY-\$1-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			G.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
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14. I do hereby certify that the information supplied with this filling 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 amountaineport 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.