2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000016105

Entity Name: HIGHLAND CORPORATION OF CENTRAL FLORIDA, INC.

FILED Mar 14, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business	Current Principal Place of Business:	New Principal Place of Business
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300 NW PHOSPHATE BLVD. MULBERRY, FL 33860

Current Mailing Address: New Mailing Address:

PO BOX 705 MULBERRY, FL 33860

FEI Number: 59-3428498 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FORE, R. SCOTT

300 NW PHOSPHATE BLVD.

MULBERRY, FL 33860 US

MAXWELL, STEVEN L

300 NW PHOSPHATE BLVD.

MULBERRY, FL 33860 US

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: STEVEN L. MAXWELL 03/14/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P
 () Delete
 Title:
 PD
 (X) Change () Addition

 Name:
 FORE, R. SCOTT
 Name:
 MAXWELL, STEVEN L

 Address:
 300 NW PHOSPHATE BLVD.
 Address:
 300 NW PHOSPHATE BLVD.

300 NW PHOSPHATE BLVD. Address: 300 NW PHOSPHATE BLVE MULBERRY, FL 33860 City-St-Zip: MULBERRY, FL 33860

Title: ST () Delete Title: VPD (X) Change () Addition
Name: FORE JULIANNE Name: HARDEN JOHNNIE M

 Name:
 FORE, JULIANNE
 Name:
 HARDEN, JOHNNIE M

 Address:
 300 NW PHOSPHATE BLVD.
 Address:
 300 NW PHOSPHATE BLVD.

 City-St-Zip:
 MULBERRY, FL 33860
 City-St-Zip:
 MULBERRY, FL 33860

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: STEVEN L MAXWELL OD 03/14/2005