

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2005 8:00 am
Secretary of State

02-03-2005 90031 012 ***150.00

40011383



DOCUMENT # P97000098828 1. Entity Name HIGHLANDS INDEPENDENT BANCSHARES, INC.					
Principal Place of Business 2600 US HIGHWAY 27 NORTH SEBRING, FL 33870			Mailing Address 2600 US HIGHWAY 27 NORTH SEBRING, FL 33870		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip Country		City & State Zip Country		4. FEI Number 65-0832435	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent SHOOP, JOHN C 1927 NE LAKEVIEW DRIVE SEBRING, FL 33870			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE John C. Shoop, President <small>Signature, typed or printed name of registered agent and title if applicable.</small>				DATE January 31, 2005 <small>(NOTE: Registered Agent signature required when reinstating)</small>	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDO SHOOP, JOHN C 1927 NE LAKEVIEW DRIVE SEBRING, FL 33870	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D James D. Bates 81 Bates Road Lake Placid, FL 33852-9129	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD BARBEN, ROBERT J 304 S. DELANEY AVE AVON PARK, FL 33825	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Charles R. Schumacher 1901 DeSoto Place Sebring, FL 33870-2314	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CREWS, ROBERT C 475 LAKE LOTELA DR AVON PARK, FL 33825	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Charles L. Shackelford -- P.O. Box 1420 -- Wauchula, FL 33873-1420	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIS, JOE L 708 EAST MAIN ST WAUCHULA, FL 33873	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D C. Wayne Taylor 814 N.S. Lakeview Dr. Sebring, FL 33870-1965	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KOCK, EDWARD O JR 1908 DELEON PLACE SEBRING, FL 33870	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Thomas S. Watkins P.O.Box 1365 Avon Park, FL 33826-1365	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PAHK, KYE C 4017 LAFAYETTE AVE SEBRING, FL 33872	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Hazel J. Steedley 400 Maravilla Ave. Sebring, FL 33875	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Hazel J. Steedley</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date January 31, 2005 <small>Daytime Phone #</small>	

ATTACHMENT

40011589

2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT #P97000098828

HIGHLANDS INDEPENDENT BANCSHARES, INC.

FEIN 65-0832435

Officer and Directors

D
Kock, Edward O. Jr
1908 DeLeon Place
Sebring, FL 33870

Make Changes/ spelling of last name

Koch, Edward O.Jr.