## **FILED**

Aug 13, 2003 8:00 am § Secretary of State

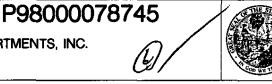
08-13-2003 90075 001 \*\*\*150.00

## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

1. Entity Name

HIGHLAND TOWER APARTMENTS, INC.



Principal Place of Business

Mailing Address

HIGHLAND TOWER APARTMENTS INC #101

410 PLAZA AVE LAKE PLACID FL 33852  2. Principal Place of Business		410 PLAZA AVE LAKE PLACID FL 33852  3. Mailing Address				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		CHECK HERE IF MAKIR	NG CHANGES	
City & Stat	to	City & State			T 17	
Ony & Olai		. Only a olate		4. FEI Number NOT APPLICABLE	Not Applicable	
Zip	. Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
	6. Name and Address of Curre	nt Registered Agent		7. Name and Address of New Registere	d Agent	
MCDOUGAL, IAN M 410 PLAZA AVE #101			Street Addres	Street Address (P.O. Box Number is Not Acceptable)		
LAKE PLACID FL 33852			City		Zip Code	
signature  F After Se	Signature, typed or printed name of registered age  ILE NOW!!! FEE IS \$550.00 ptember 10, 2003 Fee will be \$78 k Payable to Florida Department	ent and title if applicable. (NOT	TE: Registered Agent signature requi	ried when reinstating)  DATE  9. Election Campaign Financing Trust Fund Contribution.		
10.		ID DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AT	ND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MCDOUGALL, IAN M 410 PLAZA AVE #101 LAKE PLACID FL 33852	☐ Delete	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Persone apt # Persone apt #	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPST MCDOUGALL, SALLY J 410 PLAZA AVE #101 LAKE PLACID FL 33852	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	emove apt #	Change Addition	
TITLE NAME STREET ADDRESS -CITY-ST-ZIP -		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	المعالم المستعمل فيها خاداء المامين عاد المريد المستوب	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	☐ Change ☐ Addition	
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS		☐ Change ☐ Addition	

12. I 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 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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

ALLY JO Mc DOUGALL

## AHachmen+#

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10 aug 03

Div. of Corps. Uniform Business Report PO Box 1500 Isllaharree, FC 32302-1500

Gentlenen:

Tele sever secewed the original for this.

The home had many, many problems with the Post office delivering one mail to the Street address. It has been so bad that we sow have a P.O. Box in Lake Placed as many preces of mail are O sot being delivered, a being delivered, a being delivered, a being delivered to the sender, or I being delivered to a totally

AHachmen +# 80138200 P98000078745

defferent æddress that das no bearing to 410 Planja avenue. Comes you please clarge our railing address to: P.O. Box 2890 Lole Place, FL 33862-2890

If I have to pay the "400 additional fee, please contact
ne.

Seriends your. Sely J. Mesonyell