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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # \$95368

(4)

HIGHLAND OAKS ENTERPRISES, INC.

FILED	
Sep 15 1997 8:00an	n
Secretary of State	

Principal Place of Business Mailing Address									
9000 EAST FLETCHER AV ENUE SUITE 230 TAMPA FL 33613		3000 E. FLETCHER AVE Suite 230 Tampa Fl 33613-4644							
		US	US			 Date Incorporated or Qualified 11/20/1991 	3a. Date 09/16/	of Last Report /1996	
2. Principal Plac	ce of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number		Applied For	
21		26	26			59-1741614 Not Applicat			
Suite, Apt. #,	etc.	Suite, Apt. #, etc 27	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State	<u>├</u> ─┐ '			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip 24	Country 25	Zip 29	30	untry	′	8. This corporation has liability for in Florida Statutes			
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301			81	Name					
			82	Street Addres	Address (P.O. Box Number is Not Acceptable)				
			В3				······································		
				84	' '		FL	35 Zip Code	
Office or reg	the provisions of Sections 607.0 pistered agent, or both, in the Sta familiar with, and accept the ob-	ate of Florida. Such change :	was authorize	ed by	/ the corporation	ation submits this statement for the pi n's board of directors. I hereby accep	urpose of ch I the appoin	anging its registered ment as registered	
SIGNATURE _									
	gnature, typed or printed name of registered		<u> </u>	ed Age	ant signatura required		DATE		
12. OFFICERS AND DIRECTORS 13.					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				

TITLE DELETE 1.1 TITLE ☐ Change ■ Addition REIBER, WILLIAM E 1.2 NAME STREET ADDRESS 3000 E. FLTECHER AVE. SUITE 230 1.3 STREET ADDRESS TAMPA FL CITY-ST-ZIP 1.4 CITY - ST - ZIP TITLE DELETE 2.1 TITLE Change Addition NAME REIBER, TYLER P 2.2 NAME 3000 E. FLETCHER AVE, SUITE 230 STREET ADDRESS 23 STREET ADDRESS TAMPA FL CITY-ST-ZIP 2 4 CITY+ST-ZIP TITLE DELETE 31 THLE ☐ Change Addition NAME 3 2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP TITLE DELETE Change 4.1 TITLE ____ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE ☐ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE Change 6.1 TITLE noifit bA NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. I do 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 on an attachment with an address.