

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P17000067423

**Entity Name:** HIGH RIDGE, INC.

**Current Principal Place of Business:**

6915 STATE RD 54  
NEW PORT RICHEY, FL 34653

**Current Mailing Address:**

6915 STATE RD 54  
NEW PORT RICHEY, FL 34653 US

**FEI Number: 82-2479998**

**Certificate of Status Desired: No**

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

OLSON, JACQUELINE L  
6915 STATE RD 54  
NEW PORT RICHEY, FL 34653 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name BLACKWELL, II, GARY L  
Address 6915 STATE RD 54  
City-State-Zip: NEW PORT RICHEY FL 34653

Title VP  
Name CLARK, VICKI L  
Address 6915 STATE RD 54  
City-State-Zip: NEW PORT RICHEY FL 34653

Title ST  
Name OLSON, JACQUELINE L  
Address 6915 STATE RD 54  
City-State-Zip: NEW PORT RICHEY FL 34653

*I hereby 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 all other like empowered.*

**SIGNATURE: GARY L BLACKWELL, II**

**PRESIDENT**

**02/03/2020**

Electronic Signature of Signing Officer/Director Detail

Date