

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000085891

**Entity Name:** HIGHLANDS INVESTMENTS OF SEBRING, L.L.C.

**Current Principal Place of Business:**

4105 LAFAYETTE AVENUE  
SEBRING, FL 33872

**Current Mailing Address:**

4105 LAFAYETTE AVENUE  
SEBRING, FL 33872

**FEI Number:** 59-3759869

**Certificate of Status Desired:** No

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

CFRA, LLC  
100 S ASHLEY DR  
STE 400  
TAMPA, FL 33602 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

**Authorized Person(s) Detail :**

Title MGR  
Name THAKKAR, VINOD  
Address 4105 LAFAYETTE AVENUE  
City-State-Zip: SEBRING FL 33872

Title MGR  
Name THAKKAR, TARLIKA  
Address 4105 LAFAYETTE AVENUE  
City-State-Zip: SEBRING FL 33872

Title MGR  
Name THAKKAR, VIPUL  
Address 11718 SMART LANE  
City-State-Zip: CHARLOTTE NC 28277

Title MGR  
Name BACHMAN, RADHA  
Address 1107 S DUNBAR AVE  
City-State-Zip: TAMPA FL 33629

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** RADHA BACHMAN

**MGR**

**02/20/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date