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: NANLEE K HALL

Electronic Signature of Signing Officer/Director Detail

~ h 46: ofobo Th а

Address

Title

Name

Address

SIGNATURE:

Officer/Director Detail : Ρ Title Title S Name FRAZEE, GAIL K Name BUCK, JOYCE K

The above named entity submits this statement for	r the purpose of changing its	s registered office or registered	agent, or both, in the State of Florida.

FEI Number: 36-2542575

Current Principal Place of Business:

Name and Address of Current Registered Agent:

858 CARRICK BEND CIR #101

866 CARRICK BEND CIR #103

Electronic Signature of Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS ST TALLAHASSEE, FL 32301 US

City-State-Zip: NAPLES FL 34110

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City-State-Zip: NAPLES FL 34110

HALL, NANLEE K

DOCUMENT# F12000004881

858 CARRICK BEND CIR #101

Current Mailing Address: 858 CARRICK BEND CIR #101 NAPLES. FL 34110 US

NAPLES. FL 34110

Entity Name: HIGHCLIFF DEVELOPMENT CORPORATION

FILED Jan 09, 2021 Secretary of State 8373045580CC

Certificate of Status Desired: No

Address 2044 PRINCE DRIVE City-State-Zip: NAPLES FL 34110

TREASURER

01/09/2021

Date

Date