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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

668716

(4)

HARLEY-DAVIDSON OF MELBOURNE, INC.

Principal Place of Business

6030 N. HARBOR CITY BLVD MELBOURNE FL 32940

2. Principal Place of Business

Suite, Apt. #, etc.

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

6030 N. HARBOR CITY BLVD MELBOURNE FL 32940

FILED Jan 30 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 05/02/1980

59-1995923

5. Certificate of Status Desired

4. FEI Number

EE.			21					Fee nequired	
City & Sta	te		<u> </u>	City & State				6. Election Campaign Financing \$5.00 May Be	
			28	<u> </u>				Trust Fund Contribution	
Zip		Country Zip		<u> </u>	Country		8. This corporation owes or has paid the current year Intangible		
24		25	29		30	.,.		Personal Property Tax due June 30. Yes No	
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent			
OKTELA, STEVEN L						81	Name	ne	
6030 N HARBOR CITY BLVD						82	Street	eet Address (P.O. Box Number is Not Acceptable)	
MELBOURNE FL 32940									
						83			
						84 City 85 Zip Code			
								FL	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its									
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both. In the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE									
	Signature, typed o	or printed name of registered as				d Age	nt signatur	ature required when reinstating) DATE	
12.		OFFICERS AN	ND DIRECT		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TATLE	OLCTE! A	T DELETE				1.1 TITLE		☐ Change ☐ Addition	
NAME	OKTELA, RICHARD			1.2 N		AME			
STREET ADDRESS	1	ENA VISTA AVE			1.3 S	TREET	ADDRESS	is	
CITY-ST-ZIP		IRNE, FL 00000				ITY-ST	- ZIP		
TITLE	S	01.101/0		DELETE	2,1 T	TLE		Change Addition	
NAME		GLADYS			2.2 N	AME			
STREET ADDRESS		ENA VISTA AVE			2.3 S	TREET A	ADDRESS	;s	
CITY-SI-ZIP		RNE, FL 00000		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2.40	ITY - S	T-ZIP		
TITLE	PD			☐ DELETE	3,1 T	TLE		Change Addition	
NAME		STEVEN L			3.2 N	AME			
STREET ADDRESS		RIAH DRIVE			3.3 \$	REET A	ADDRESS	ıs	
CITY - ST - ZIP	MELBOU	RNE FL			3.4. C	ITY-ST	r-zip		
TITLE	۷D			DELETE	4.1 TI	TLE		☐ Change ☐ Addition	
NAME		CAROL D			4. 2 N	AME			
STREET ADDRESS		RIAH DRIVE			4.3 51	REET A	ADDRESS	s	
CITY - ST - ZIP	MELBOU	RNE FL			4.4 CI	TY-ST	- ZIP		
TITLE				☐ DELETE	5.1 T(TLE		☐ Change ☐ Addition	
NAME					5.2 N/	ME			
STREET ADDRESS					5.3 ST	REET A	ADDRESS	s	
CITY - ST - ZIP					5.4 CI	TY-ST	- ZIP		
TITLE	:			DELETE	6.1 TF	ILE		☐ Change ☐ Addition	
NAME					6.2 N/	ME			
STREET ADDRESS					6.3 ST	REET A	ODRESS	s l	
CITY-ST-ZIP						TY-ST-		(
 I hereby c indicated 	ertily that the on this annual	information supplied will report or supplement	rith this filir al annual re	ng does not qualify	for the exe	mpti d that	on state	ated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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.

SIGNATURE:

1-14-98

407 259 1311

Applied For

\$8.75 Additional

Not Applicable