## 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

POCUMENT # \$84262

J.E. HARRISON'S AUTO SALES CORPORATION

Principal Place of Business

Mailing Address

2070 MEADOWLANE AVE

P.O. BOX 1874

**FILED** Apr 14 1997 8:00am Secretary of State



US	L 02401	US	•				
					3. Date Incorporated or Qualified 09/30/1991	3a. Date of Las 08/20/1996	
2. Principal Place of Business		2a. Mailing Address			4. FEI Number		Applied For
21 2076 Meadowlane Ave					59-3084702		Not Applicable
	elc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		5 Additional
22   City & State		[27]			Fec	Required	
<u> </u>	16	City & State			6. Election Campaign Financing		<b>)0</b> May Be
Zip	Country	<b>28</b>   	Coun		Trust Fund Contribution		od to Fees
24	25	}·1 ⊢	1	пy	8. This corporation has liability for in	ntangible tax unde ] Yes : [] No	r s. 199.032,
241	9. Name and Address of Current F		30]		Florida Statutes  10. Name and Address of New Reg		
EDE	SE, GARY B.		·	Name	The section and rest in the rest	JOINTON MYOU	<del></del>
	S. HARBOR CITY BLVD.		L				,
	E 505		E	82 Street Address (P.O. Box Number is Not Acceptable)			
	BOURNE FL 32901		F	3			
] """	000111L   C 06001						
1			ε	34 City		FL 85 Z	ip Code
11. Pursuant	to the provisions of Sections 607.0502 a	and 607,1508, Florida Statutes	s. the abo	l ove-named co	rporation submits this statement for the pr		n its registered
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, or both, and accept the chickening of Section 607.0106. Excitor Statutes are provided by the corporation's pour directors.							
agent. Fam familiar with, and accept the obligations of, Section 607.0005, Florida Statutes.							
SIGNATURE Signature: typod or printed panie of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE  DATE							
12.	OFFICERS AND I		13.		ADDITIONS/CHANGES TO OFFICE		ORS IN 12
TITLE	D	☐ DELETE	1.11111			☐ Chang	
NAME	HARRISON, JENNINGS E.		1.2 NAM	ι			
STREET ADDRESS	1637 SEABURY POINT RD		1.3 STHE	ET ADDRESS			
CITY-ST-ZIP	PALM BAY FL		1.4 City	-ST-7/P			
TITLE	D	DELETE	211111			☐ Chang	e Addition
NAME	HARRISON, BETTY K.		2.2 NAM	F			•
STREET ADDRESS	1637 SEABURY POINT RD		2.3 STRE	ET ADDRESS			
CITY-ST-ZIP	PALM BAY FL		2.4 0111	( - S1 - ZIP			
TITLE		☐ ĐELETE	3.17(1)			☐ Chang	e Addition
NAME			3 2 NAM	E			
STREET ADDRESS			3.3 \$1RE	LT ADDRESS			1
CITY-ST-ZIP				(-S1-ZIP			
TITLE		☐ otten	4.1 TITLE			Chang	e Addition
NAME			4. 2 NAM	ir į			
. Street address			4 3 STRE	ET ADDRESS			
CITY+ST-ZIP	·		4.4 C(TY				
TALE		□ DELED€	5.1 101.6			☐ Change	e 🔲 Addition
NAME			5.2 NAM				
STREET ADDRESS			5.3 STRE	ET ADDRESS			<u> </u>
CITY-ST-ZIP			5.4 CITY	- \$1 - Z(P		T.V. F. T. T. L.	
TITLE		( Doctate	6.1 7471.8		<del></del>	Change	Addition
NAME			6.2 NAM				
STREET ADDRESS			6.3 STRE	E1 ADDRESS			1
CITY-ST-ZIP			6.4 CHY	- ST - 7IP			

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 eath; 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.