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Jan 16 1997 8:00am

Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000088899 (6)

1. Corporation Name  
HARRIS CAPITAL MANAGEMENT, INC.



Principal Place of Business  
1060 SOUTHWEST CYPRESS WAY  
BOCA RATON FL 33486

Mailing Address  
1060 SOUTHWEST CYPRESS WAY  
BOCA RATON FL 33486-5612

2. Principal Place of Business  
21 463 ASHWOOD PL  
Suite, Apt. #, etc.  
22  
City & State  
23 BOCA RATON, FL  
Zip  
24 33431 Country  
25 U.S.A.

2a. Mailing Address  
26 463 ASHWOOD PL  
Suite, Apt. #, etc.  
27  
City & State  
28 BOCA RATON, FL  
Zip  
29 33431 Country  
30 U.S.A.

3. Date Incorporated or Qualified  
11/20/1995

3a. Date of Last Report  
05/01/1996

4. FEI Number  
65-0625000

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent  
HARRIS, BENFORD C.  
1060 SOUTHWEST CYPRESS WAY  
BOCA RATON FL 33486

10. Name and Address of New Registered Agent  
81 Name HARRIS, BENFORD C.  
82 Street Address (P.O. Box Number is Not Acceptable)  
463 ASHWOOD PLACE  
83  
84 City BOCA RATON FL 85 Zip Code 33431

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 or printed name of registered agent and fee if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPT	11 TITLE	DPT
NAME	HARRIS, BENFORD C	12 NAME	HARRIS, BENFORD C.
STREET ADDRESS	1060 SOUTHWEST CYPRESS WAY	13 STREET ADDRESS	463 ASHWOOD PL
CITY-ST-ZIP	BOCA RATON FL 33486	14 CITY-ST-ZIP	BOCA RATON, FL 33431
TITLE	V/S	21 TITLE	V/S
NAME	HARRIS, BENFORD C	22 NAME	HARRIS, BENFORD C.
STREET ADDRESS	1060 SOUTHWEST CYPRESS WAY	23 STREET ADDRESS	463 ASHWOOD PLACE
CITY-ST-ZIP	BOCA RATON FL 33486	24 CITY-ST-ZIP	BOCA RATON, FL 33431
TITLE		31 TITLE	
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. 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 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: 1/10/97 (561) 750 7231

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)