

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 125171

1. Corporation Name

J. C. HARRIS COMPANY

1999

Principal Place of Busines

Mailing Address

Mar 25, 1999 8:00 am Secretary of State

03-25-1999 90006 042 ***150.00



335 CLEMATIS ST WEST PALM BEACH FL 33401		335 CLEMATIS ST WEST PALM BEACH FL 33401			DO NOT WRITE IN THIS SPACE					
•	•				3. Date Incorporated or Qualifed 09/08/1931					
2. Principal Place of Business	2a. Mailing Addre	ess			4. FEI Number 59-0283381		Applied For Not Applicable			
Suite, Apt. #, etc.	Suite, Apt. #,	etc.	•		5. Certificate of Status Desired	v -	5 Additional Required			
City & State	City & State				6. Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees			
Zip Country	Zip	Zip .Cou			This corporation owes the current year Interpretation Property Tax.	angible (X) Yes	□No			
g. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent					
HARRIS, ROBERT K.			81	Name						
335 CLEMATIS STREET			82	Street Address (P.O. Box Number is Not Acceptable)						
WEST PALM BEACH FL 33401			83	3						
			84	City	FL	<u>. </u>	Zip Code			
44 Pursuant to the provisions of Sections 607	0502 and 607 1508. Florid	ta Statutes, the ab	ove	-named corpor	ation submits this statement for the purpose of	changing	its registered			

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.

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SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Rec	gistered Agent signature re	equired when reinstating)	DATE						
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12											
TITLE	P DEL	LETE	1.1 TITLE		☐ Change	Addition					
NAME	HARRIS, ROBERT K		1.2 NAME								
STREET ADDRESS	335 CLEMATIS ST.		1.3 STREET ADDRESS								
CITY-ST-ZIP	WEST PALM BEACH FL		1.4 CITY-ST-ZIP			Ì					
TITLE	V DEL	LETE	2.1 TITLE		☐ Change	☐ Addition					
NAME	HARRIS, JAMES B		2.2 NAME			į					
STREET ADDRESS	335 CLEMATIS STREET		2.3 STREET ADDRESS								
CITY-ST-ZIP	WEST PALM BEACH FL		2.4 CITY-ST-ZIP	<u> </u>							
TITLE	P DEL	LETE	3.1 TITLE		Change	Addition					
NAME	HARRIS, ROBERT K.		3.2 NAME								
STREET ADDRESS	335 CLEMATIS STREET		3.3 STREET ADDRESS	•	•						
CITY-ST-ZIP	WEST PALM BEACH FL		3.4, CITY-\$T-ZIP		··						
TITLE	. DEL	LETE	4.1 TITLE		Change	☐ Addition					
NAME	•		4.2 NAME								
STREET ADDRESS			4.3 STREET ADDRESS	·							
CITY-ST-ZIP	·		4.4 CITY-ST-ZIP	· ·							
TITLE	DEL	LETE	5.1 TITLE		Change	Addition \					
NAME			5.2 NAME	•							
STREET ADDRESS			5.3 STREET ADDRESS	•							
CITY-ST-ZIP	<u>,</u>		5.4 CITY-ST-ZIP	·							
TITLE	□ DEI	LETE	6.1 TITLE	•	Change	☐ Addition					
NAME			6.2 NAME								
STREET ADDRESS			6.3 STREET ADDRESS								
000/07 700			6.4 CITY-ST-ZIP	•							

14. I 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, with all other like empowered.