

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 28 PM 6:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 337402

(2)

1. Corporation Name

HARLEE - GARGIULO, INC.

Principal Place of Business

U S HIGHWAY 301 EAST
P. O. BOX 8
PALMETTO FL 34220

Mailing Address

U S HIGHWAY 301 EAST
P. O. BOX 8
PALMETTO FL 34220

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

11/06/1968

3a. Date of Last Report

05/01/1994

4. FEI Number

59-1224354

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

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23

City & State

28

Zip

Country

24

25

Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HARLEE, JOHN P. III
1205 MANATEE AVE. WEST
BRADENTON FL 34205**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	CD
NAME	HARLEE, PETER S
STREET ADDRESS	2308 HWY 301 N.
CITY - ST - ZIP	PALMETTO FL
TITLE	DV
NAME	GARGIULO, JEFFREY
STREET ADDRESS	15000 OLD 41 N.
CITY - ST - ZIP	NAPLES FL
TITLE	PD
NAME	HARLEE, PETER S JR.
STREET ADDRESS	2308 HWY 301 N.
CITY - ST - ZIP	PALMETTO FL
TITLE	STD
NAME	WHISENANT, R B
STREET ADDRESS	SR 62 EAST
CITY - ST - ZIP	PARRISH FL
TITLE	VAD
NAME	HUNSADER, ROBERT
STREET ADDRESS	4507 22ND AVE. W.
CITY - ST - ZIP	BRADENTON FL
TITLE	AS
NAME	BOYSLTON, ALICE H
STREET ADDRESS	2105 5TH ST. W.
CITY - ST - ZIP	PALMETTO FL 34221

1.1 TITLE	Director Emeritus	☒ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY - ST - ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE	C, S, T, D	☒ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Peter S. Harlee, Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/95

813/722-7747

Date

Daytime Phone

337402

HARLEE-CARGIULO, INC.
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Officers and Directors

John P. Harlee, III
P.O. Box 9320
Bradenton, FL 34206

D,V