2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2001 8:00 am
Secretary of State
05-01-2001 90056 020 ***158.75

DOCUMENT # 337402

1. Entity Name
HARLLEE PACKING, INC.

Principal Place of Business	Mailing Address
U S HIGHWAY 301 EAST P. O. BOX 8 PALMETTO FL 34220	U S HIGHWAY 301 EAST P. O. BOX 8 PALMETTO FL 34220

J34301

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1224354 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HARLLEE, PETER S. JR. 2308 US HWY 301N PALMETTO FL 34221	Name: JOHN P. HARLLEE, IV Street Address (P.O. Box Number is Not Acceptable): 2308 US HWY 301 N. City: PALMETTO FL Zip Code: 34221

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: John P. Harllee 04-24-01
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DE HARLLEE, PETER S 2308 HWY 301 N. PALMETTO FL	XX Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HARLLEE, JOHN P. IV 2308 HWY 301 N. PALMETTO, FL 34221	☐ Change XX Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HARLLEE, PETER S JR. 2308 HWY 301 N. PALMETTO FL	XX Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VASD HUNSADER, JOSEPH 208 25TH ST. W. BRADENTON, FL 34205	☐ Change XX Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CSTD WHISENANT, R B SR 62 EAST PARRISH FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VASD HUNSADER, ROBERT 4507 22ND AVE. W. BRADENTON FL	XX Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: John P. Harllee 04-24-01 941-722-7747
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)