

**CORPORATION
ANNUAL REPORT
1997**



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

DOCUMENT # 338499
1. Corporation Name
HARRIS MANUFACTURING, INC.

Principal Place of Business Mailing Address
112 Industrial Loop P.O. Box 2429
Orange Park, FL 32068 Orange Park, FL 32073

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business 21 112 Industrial Loop Suite, Apt. #, etc.	28. Mailing Address 28 P.O. Box 2429 Suite, Apt. #, etc.	4. FEI Number 59-1230577	Applied For Not Applicable
22	29	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
23 Orange Park, FL City & State	29 ORANGE PARK, FL City & State	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
24 32068 Zip	25 USA Country	29 32073 Zip	30 USA Country

3. Date Incorporated or Qualified
1968

3a. Date of Last Report

7. Name and Address of Current Registered Agent Lynda H. Preble 4244 Tanglewilde Dr., S. JAX, FL 32257	10. Name and Address of New Registered Agent
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11. Pursuant to the provisions of Sections 607.0603 and 607.1806, 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 607.0603, Florida Statutes.

SIGNATURE

Signature of registered agent and title if applicable

NOTE: Registered Agent Signature required when requesting

DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	NAME	STREET ADDRESS	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS
	President & Director	Lynda H. Preble			
		P.O. Box 2429 - 112 Industrial Loop			
		Orange Park, FL 32073 32067			
TITLE	NAME	STREET ADDRESS	2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS
	Secretary & Director	GEORGE WILSON			
		P.O. Box 2429 - 112 Industrial Loop			
		Orange Park, FL 32073 32067			
TITLE	NAME	STREET ADDRESS	3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS
TITLE	NAME	STREET ADDRESS	4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS
TITLE	NAME	STREET ADDRESS	5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS
TITLE	NAME	STREET ADDRESS	6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS

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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 119.07(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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Signature and Title of Officer or Director

4-29-97 (904) 269-7878