

FILED

May 14 1997 8:00am
Secretary of State

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 112 Industrial Loop Orange Park, FL 32068		Mailing Address P.O. Box 2429 Orange Park, FL 32073	
DO NOT WRITE IN THIS SPACE.			
2. Principal Place of Business 21 112 Industrial Loop Suite, Apt. #, etc.		22. Mailing Address 22 P.O. Box 2429 Suite, Apt. #, etc.	
23 City & State ORANGE PARK, FL		24 City & State ORANGE PARK, FL	
25 Zip 32068		26 Zip 32073	
27 Country USA		28 Country USA	
29 Name and Address of Current Registered Agent Lynda H. Preble 4244 Tanglewilde Dr., S. JAX, FL 32257		30 Name and Address of New Registered Agent	
31 Name Lynda H. Preble		32 Street Address (P.O. Box Number is Not Acceptable) 4244 Tanglewilde Dr., S.	
33		34 City JAX	
35 State FL		36 Zip Code 32257	
11. Pursuant to the provisions of Sections 607.0802 and 607.1608, 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 607.0802, Florida Statutes.			
SIGNATURE <i>Lynda H. Preble</i>		DATE 4-29-97	
12. OFFICERS AND DIRECTORS			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE President & Director		1.2 NAME Lynda H. Preble	
1.3 STREET ADDRESS P.O. Box 2429 - 112 Industrial Loop		1.4 CITY-STATE-ZIP ORANGE PARK, FL 32073 32067	
2.1 TITLE Secretary & Director		2.2 NAME GEORGE WILSON	
2.3 STREET ADDRESS P.O. Box 2429 - 112 Industrial Loop		2.4 CITY-STATE-ZIP ORANGE PARK, FL 32073 32067	
3.1 TITLE		3.2 NAME	
3.3 STREET ADDRESS		3.4 CITY-STATE-ZIP	
4.1 TITLE		4.2 NAME	
4.3 STREET ADDRESS		4.4 CITY-STATE-ZIP	
5.1 TITLE		5.2 NAME	
5.3 STREET ADDRESS		5.4 CITY-STATE-ZIP	
6.1 TITLE		6.2 NAME	
6.3 STREET ADDRESS		6.4 CITY-STATE-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 119.07(3)(k), Florida Statutes. I further certify that the information disclosed 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, changed, or on an attachment with an address.			
SIGNATURE <i>Lynda H. Preble</i>		DATE 4-29-97	
Lynda H. Preble		(904) 269-7878	