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Secretary of State

PROFIT CORPORATION ANNUAL REPORT **1998**

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

DOCUMENT # **338499** **(7)**

1. Corporation Name
HARRIS MANUFACTURING, INC.

Principal Place of Business	Mailing Address
112 INDUSTRIAL LOOP ORANGE PARK FL 32073 US	P. O. BOX 2429 ORANGE PARK FL 32067 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/05/1968
4. FEI Number: 59-1230577 ☐ 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

PREBLE, LYNDA H
4294 TANGLEWILDE DR
JACKSONVILLE FL 32257

10. Name and Address of New Registered Agent

81 Name: Scott A Green
82 Street Address (P.O. Box Number is Not Acceptable): 153 Boar Pen
83
84 City: Ponte Vedra Bch FL 85 Zip Code: 32082

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] Scott A. Green - President   DATE: 3-2-98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD ☒ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	PREBLE, LYNDA H	1.2 NAME	
STREET ADDRESS	112 INDUSTRIAL LOOP	1.3 STREET ADDRESS	
CITY-ST-ZIP	ORANGE PARK FL 32073	1.4 CITY-ST-ZIP	
TITLE	SD ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	WILSON, GEORGE	2.2 NAME	
STREET ADDRESS	112 INDUSTRIAL LOOP	2.3 STREET ADDRESS	
CITY-ST-ZIP	ORANGE PARK FL 32073	2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	P/D ☐ Change ☒ Addition
NAME		3.2 NAME	Scott A Green
STREET ADDRESS		3.3 STREET ADDRESS	153 Boar Pen
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Ponte Vedra Bch, FL 32082
TITLE	☐ DELETE	4.1 TITLE	S/T/D ☐ Change ☒ Addition
NAME		4.2 NAME	Steven F. Sipkovsky
STREET ADDRESS		4.3 STREET ADDRESS	269 Odons Mill Blvd
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Ponte Vedra Bch, FL 32082
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

CR2E034 (10/97)

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.

SIGNATURE: [signature] Steven F Sipkovsky 3-2-98 (904) 269-7878