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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthago

Secretary of State

DIVISION OF CORPORATIONS

1996 **DOCUMENT #**

CITY-51-76

appears in Block 12 or Block 13 if changed, or on an attachment with an address

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DICK FARMER'S HARLEY DAVIDSON OF ORLANDO, INC. Principal Place of Business Mailing Address 46 NORTH ORANGE BLOSSOM TRAIL 46 NORTH ORANGE BLOSSOM TRAIL ORLANDO FL 32805 ORLANDO FL 32805 3. Date Incorporated or Qualified 3a. Date of Last Report 08/06/1970 03/21/1995 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 59-1297562 21 26 Not Applicable Stite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be П 23 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation has liability for intangible tax under s 199.032, 25 29 24 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FARMER, RICHARD E. **B2** Street Address (P.O. Box Number is Not Acceptable) 1120 HUNTER AVENUE 83 ORLANDO FL 32804 City 84 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 Stor whire, typed or printed name of registered agent and ittle if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE THILE 1. 1 TITLE ☐ Change ☐ Addition FARMER, BEVERLY J. NAME 1.2 NAME 46 N ORANGE BLOSSOM TR STREET ADDRESS. 1.3 STREET ADDRESS ORLANDO, FL 00000 CITY - ST - ZIF 1.4 CiTY - ST - ZIP THILE DELE TE ☐ Addition 2 1 TITLE Change Change FARMER, RICHARD E. NAME 22 NAME 46 N ORANGE BLOSSOM TR STREET ADDRESS 2.3 STREET ADDRESS ORLANDO, FL 32805 CHIY-ST-ZIP 2.4 CITY - ST - ZIP DELF TE Tif. £ 3 1 TITLE Change Addition FARMER, PATRICK J. 3.2 NAME 46 N ORANGE BLOSSOM TR STREET ADDRESS 3.3. STREET ADDRESS ORLANDO, FL 00000 Class ST Stb 3.4 CITY - ST- ZIP H'UF DELETE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 400001741214 -03/13/96--01038--03 THEF DELETE 5 1 TITLE NAME 52 NAME ***400.00 STREET ADDRESS 5.3 STREET ADDRESS UTY ST-ZP 5 4 CITY - \$1 - 7IF TILE DELETE 6 1 TITLE ☐ Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

(12/95)

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Richard E. Farmer 02-01-96 **SIGNATURE** (407) 423-0346 SIGNING OFFICER OR DIRECTOR Daytinie Phone ₹

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 119.07(3)(k), 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