FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 491517

(9)

2a. Mailing Address

City & State

Suite, Apt. #, etc.

HARKINS HOLDINGS, INC.

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Principal Place of Business	Mailing Address
4329 LAFAYETT ST	PO BOX 940
MARIANNA FL 32446	PARIANNA FL 32447-0940
US	US

26

27

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

FILED Apr 23 1997 8:00am Secretary of State



3a. Date of Last Report

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

0055111

Not Applicable

04/29/1996

3. Date Incorporated or Qualified

11/24/1975

59-1657343

5. Certificate of Status Desired

6. Election Campaign Financing

4. FEI Number

3		[26]				HUSE FORG CORING	DUION L	MOUDO I	U FOOS
Ζιρ	Country	Zip		Country		8. This corporation ha	as liability fo <u>r in</u> tangibl	e tax under s.	199.032,
4	25	29	30			Florida Statutes		☐ No	
	9, Name and Address of Curre	nt Registered Agei	nl			10. Name and Addre	es of New Registered	Agent	
Harkins, James E. 4286 Lafayette street			B1	Name					
			82	82 Street Address (P.O. Box Number is Not Acceptable)					
Map	MANNA FL								
				83					
				84	City			85 Zip (Code
					,		Fl		
office or re	to the provisions of Sections 607.05(egistered agent, or both, in the State ni familiar with, and accept the obrig	o of Florida. Such el	hange was autho	prized by	the corporal	poration submits this state tion's board of directors. I	ment for the purpose in hereby accept the ap	of changing its pointment as	s registered registered
SIGNATURE						-1	······································		
12.	Segrative types of priored spino of registured ag	ent and title if applicable. ID DIRECTORS	(NOTE: Reg	gstered Age	nt signature requi	red when reinstating)	DATE GES TO OFFICERS AN	IN DIRECTOR	C (N) 12
TILE [PD OFFICERS AN		DELETE	1.1 TITLE		ADDITIONS/CHANC	JES TO OFFICERS AN	Change	Addition
NAME	HARKINS, JAMES E.	<u></u>	, 0,000	1.2 NAME	{			- Omingo	radiion
STREET ADDRESS	4286 LAFAYETTE ST			1.3 STREET	ADDRESS				
1	MARIANNA FL				}				
City - S1 - 74P	D D		DELETE	14 CITY-S 21 TITLE	1-20	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Change	Addition
NAME	HARKINS, LAURA L.	Line) OFFICIE	2.2 NAME	1			L. Drange	L_J Modition
i	4286 LAFAYETTE STREET		i		ADDOCCO				
STREET ADORESS	MARIANNA FL		1	2.3 STAEET	· · ·		•		
City+St-ZiP Title	WANTAIN LF		DELETE	2.4 CITY-S 3.1 TITLE	11-211	· ······ · · · · · · · · · · · · · · ·		Change	Addition
NAME		h	Decert	3.2 NAME				- Direitge	
1				-	*0000cc				
STREET ADDRESS				3.3 STREET	í				
CHY-ST-ZIP TITLE			DELE TE	3.4 CITY-S	II-ZIP			Change	Addition
NAML		_	, 001010	4. 2 NAME	1			Carrie Carrier	L.J Nodilon
STREET ADDRESS			and the state of t	4.3 STREET	ADDRESS				
İ			Į.						
CHY-S1-7IP			DELETE	4.4 CITY-S 5.1 TITLE	1-28			[_ Change	Addition
NAME		_		5.2 NAME	1			الواسات سي	
STREET ADORESS			1	5.3 STREET	ADDRESS				
ì			1		· · · ·)				
CITY-ST ZIP			DELFTE	5.4 City-S 6.1 Title	1-211			Change	Addition
Į.		b	, seeme		}			r⊐ ⇔iguβs	L Addition
NAME CANCEL ASSESSED				62 NAME	1000000				
STREET ADDRESS			ŧ	6.3 STREET					
CITY - ST-2IP	by certify that the information supplie	o with this filing do	ne not qualify to	6.4 CITY - S		d in Section 119 07/21/3	Incida Statutas I furth	ar partify that	the
informatio	n indicated on this annual report or ficer or director of the corporation o	supplemental annua	al report is true :	and accu	rate and tha	t my signature shall have	the same legal effect a	as if made und	der oath; that