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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name F13029

(6)

HARRIS BUSINESS GROUP, INC.

**FILED** Jan 26 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						5 5681168 (tibt bittut erren unter einer alnet nente		
611 N.BARKER RD., STE.200 611 N.BARKER RD., STE.200								
BROOKFIELD WI 53045 BROOKFIELD WI 53045								
US US					DO NOT WRITE IN THIS SPACE			
					Date Incorporated or Qualified     12/29/1980			
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	····		
<b>├</b>	lace of Business	2a. Mailing Address			59-2058740		Applied Far	
21		26					Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		75 Additional	
22 27							ee Required	
City & State	9	City & State					.00 May Be	
23		28			Trust Fund Contribution L	Added to Fees		
Zip	Country	Zip	Count	ry	8. This corporation owes or has paid the			
24	25	29	30		Personal Property Tax due June 30.	Yes	∐ No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Regist	ered Agent		
DAI	LTON, CARL		8	1 Name				
275	51 QUAIL HOLLOW RD. E		82 Street Ad		ddress (P.O. Box Number is Not Acceptable)			
CIT	EARWATER FL 34621		oz Sileel Au		diess (F.O. Box (40) lbdl is 140) Acceptable)		•	
			8	3				
			f	1				
			8	4 City		85	Zip Code	
				<u> </u>		FL		
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statul of Florida, Such chance was	tes, the abo	ve-named co	orporation submits this statement for the purp ration's board of directors. I hereby accept th	ose of chang e annointme	ing its registered into as registered	
agent. La	m familiar with, and accept the obliga-	ions of, Section 607.0505, FI	orida Statut	9 <b>\$</b> .	,			
SIGNATURE								
SIGNATORE	Signature, typed or printed name of registered agen	and title if applicable. (NOT	TE: Registered A	gent signature rec	quired when reinstating)	ATE	f	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS			
TITLE	D	A DELETE	1.1 TITLE			☐ Ch	ange 🔲 Addition 🖫	
NAME	HARRIS, THOMAS	, ·	1.2 NAME	:				
STREET ADDRESS	8 BELLVIEW BLVD #803		1.3 STRE	ET ADDRESS			}	
CITY-ST-ZIP	BELLAIRE BCH. FL		1,4 CITY					
TITLE	PDS	DELETE	2.1 TITLE	<del></del>		Ch:	ange	
	SEYLER, ALFRED E		2.2 NAM					
NAME	4034 DEER CREEK LANE							
STREET ADDRESS			2.3 STRE	ET ADDRESS				
CITY-ST-ZIP	WADSWORTH IL	×	2. 4 CITY					
TITLE	D	DELETE	3.1 TITLE		•	L Chi	ange 📙 Addition	
NAME	DALTON, CARL O	-	3.2 NAME	:				
STREET ADDRESS	2751 Quail Hollow Rd.,E.		3.3 STREI	T ADDRESS				
CITY-ST-ZIP	CLEARWATER FL		3.4. CITY	-ST-ZIP				
TITLE	DC	DELETE	4.1 TITLE			Cha	ange Addition	
NAME	NELSON, WILLIAM G	<del>_</del> _	4. 2 NAM					
	22 W100 GLEN VALLEY DR			T ADDRESS				
Street address	GLEN ELLYN IL							
CfTY-ST-ZIP	CLIT LLIT IL	[ ] Beiere	4.4 CITY -			☐ Čh;	ange Addition	
TITLE		DELETE	5.1 TTLE			☐ Cit	mye I Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STRE	T ADDRESS				
CITY-ST-ZIP			5.4 CITY	ST-ZIP				
TITLE	The second secon	DELETE	6,1 TITLE			☐ Cha	ange Addition	
NAME			6.2 NAME	:				
STREET ADDRESS				T ADDRESS			į	
							***************************************	
CITY-ST-ZIP	partify that the information supplied with	this filing does not qualify f	6.4 CITY-	ntion stated	in Section 119.07(3)(i), Florida Statutes. I furti	ner certify the	at the information	
indiana	an this annual report of number of the	and the state of the second of	curate and t	hat my cland	sture chall have the came lengt effort as if ma	de under oat	h that I am an	

itee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE:

1105198

414-784-9099