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

PROFIT CORPORATION ANNUAL REPORT

1997

**SIGNATURE** 



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Feb 03 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # F9300004492 (5)

HARRIS-JOHNSON INDUSTRIES, INC.

Principal Place of Business Mailing Address							THE THE CASE COLUMN AND THE PARTY OF THE PAR				
833 WINSTON S GREENSBORO		833 WINSTON STREET GREENSBORO NC 27405-7235									
							3. Date Incorporated or Qualified 09/30/1993	i	ate of Last    23/1996	Report	
2. Principal Pl	ace of Business	2a. Mailing Address					4. FEI Number	IXXI		Applied For	
21		26					56-0746454		N	lot Applicable	
Suite, Apt	#, elc	Suite, Apt. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State	9	City & State					6. Election Campaign Financing		\$5.00	D May Be	
23		28					Trust Fund Contribution			to Fees	
Zip <b>24</b>	Country 25	Zip <b>29</b>	30	Country			8. This corporation has liability for it Florida Statutes	ntangible Yes		s. 199.032,	
	9. Name and Address of Curre		1,==.1	T			10. Name and Address of New Reg	sistered	Agent		
MAR	TIN, SCOTT LEE			81	N	lame					
8237 BARRACUDA ROAD				82	Street Add		iress (P.O. Box Number is Not Acceptable)				
JAC	KSONVILLE FL 32244			<b>B3</b>					<del></del>		
				83							
				84	C	ity		FŁ	85 Zip	Code	
44 Discussion	to the graditions of Sections 607 (6)	22 and 607 1509. Florida State	utoe the	a above		amed corno	vation submits this statement for the n			its registered	
office or r	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida, Such change was	s author	rized by	/ the	e corporatio	ration submits this statement for the p on's board of directors. I hereby accep	t the ap	pointment a	s registered	
ū	m tamiliar with, and accept the oblig	jations of, Section 607.0505, F	rionda	Siaiules	š.						
SIGNATURE.	Signature, typed or printed name of registered as	ent and tole if applicable (NC	OTE: Regis	stered Age	ent si	ignature requires	d when reinstating)	DATE		<del></del>	
12.	OFFICERS AN	ID DIRECTORS	1	13.	_		ADDITIONS/CHANGES TO OFFIC	ERS AN			
MπL€	CPT	☐ DELETE	1	.1 TITLE					Change	Addition	
NAME	JOHNSON, JOHN F SR		1	.2 NAME							
STREET ADDRESS	831 WINSTON STREET		1	1.3 STREET	ADD	DRESS					
CITY-ST-7:F	GREENSBORO NC 27405	200,000	_	I.4 CITY - S	T - Z	IP			T 1 05		
TITLE	VCS	DELETE	- 1	2.1 TITLE					Change	Addition	
NAME	JOHNSON, STEVEN L			2.2 NAME							
STHEET ADDRESS	831 WINSTON STREET		1	3 STREET		į.	. • •	1.5			
City-St-Zi <sup>o</sup>	GREENSBORO NC 27405 V	DELETE		2 4 CITY-S 31 THILE	37 - Z	ZIP			Change	Addition	
TITLE NAME	•	been	1	3.2 NAME					- Cinarigo		
STREET ADDRESS	NIX, JERRY S 831 WINSTON STREET			3.3 STREET	r ADF	naree					
	GREENSBORO NC 27405			3.4. CITY- 5							
CITY+ST-ZIP TITLE	GREENSBORG NO E7403	DELÉTE		4.1 TITLE	31-2	."			Change	Addition	
NAME				4. 2 NAME							
STREET ADDRESS			4	4.3 STREET	I ADI	ORESS					
CITY+S1-ZiP			4	4.4 CITY - S	ST-2	IP					
TIPLE		DELETE	5	5.1 TITLE					Change	Addition	
NAME			5	5.2 NAME							
STREET ADDRESS				5.3 STREET	( AD(	DRESS					
CHTY - S1 - ZIP		······································		5.4 CITY - S	31-2	IP	ut al				
TITLE		DELETE		6.1 TITLE					Change	Addition	
NAME				6.2 NAME							
STREET ADDRESS			6	6.3 STREET	í ADÍ	DRESS					
City - ST - ZiP				6.4 CITY-S			14 Continue 440 A21AVIV EC. 24. Of 11.	16.4	or on the sale	at the	
lamianin	by certify that the information supplied in indicated on this annual report or officer or director of the corporation on Block 12 or Block 13 if changed in the Block 12 or Block 13 if changed in the Block 12 or Block 13 if changed in the Block 12 or Block 13 if changed in the Block 12 or Block 13 if changed in the Block 13 if chan	or the receiver or trustee emor	owered	to exec	urat cute <b>7</b>	te and that the this report	in Section 119.07(3)(i), Florida Statute my signature shall have the same lega as required by Chapter 607, Florida S	d effect a	as if made t and that my	inder oath; tha / name	