

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

FILED
Jan 29 1997 8:00am
Secretary of State

DOCUMENT # F93000004789 (4)

1. Corporation Name
HARRIS CHAPMAN & COMPANY

Principal Place of Business

103 WASHINGTON ST
MORRISTOWN NJ 07960
US

Mailing Address

19 VIA VERONA
PALM BEACH GARDENS FL 33418-3749



3. Date Incorporated or Qualified

10/20/1993

3a. Date of Last Report

01/26/1996

2. Principal Place of Business

21 19 VIA VERONA

2a. Mailing Address

26 Suite, Apt. #, etc.

4. FEI Number

22-3255770

Applied For

Not Applicable

Suite, Apt. #, etc.

22 City & State
23 PALM BEACH GARDENS, FL

Suite, Apt. #, etc.

27 City & State

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

24 33418

Country

25 USA

Zip

29

Country

30

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

KRISTENSEN, RICHARD E
19 VIA VERONA
PALM BEACH GARDENS FL 33418

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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 *Richard E. Kristensen* RICHARD E. KRISTENSEN

1/19/97

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
DP	SORKIN, MICHAEL R	15 KETCH ROAD	MORRISTOWN NJ 07960	<input checked="" type="checkbox"/>
DVS	KRISTENSEN, RICHARD E	19 VIA VERONA	PALM BEACH GARDENS FL 33418	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
DP				<input checked="" type="checkbox"/>	<input type="checkbox"/>
DVS	D. CARY MOORE	19 VIA VERONA	PALM BEACH GARDENS, FL 33418	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

14. I do 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: *Richard E. Kristensen* RICHARD E. KRISTENSEN

1/19/97 (S61) 694-6661

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0309220

CR2E034 (9/96)