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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Sep 21, 1999 8:00 am Secretary of State

09-21-1999 90017 043 \*\*\*550.00

## DOCUMENT # F98000004726 1. Corporation Name

HARVARD MANAGEMENT GROUP, INC.

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Principal Place	of Business	Mailing	g Address				<b>'</b>					•	
2714 NINTH ST	N ·		2714 NINTH ST N										
ST PETERSBURG FL 33704			ST PETERSBURG FL 33704					DO NOT WRITE IN THIS SPACE					
								3 Date In	corporated or C				
			,						/1998				
• Dringing Pl	ace of Business	2a Ma	ailing Address	-				4. FEI Nu	mber			Apr	lied For
	ace of pusitiess	<del> </del>	26					50	1-336	850	3	Not	Applicable
Suite, Apt.	# etc		Suite, Apt. #, etc.									\$8.75 A	dditional
22	,	_	27					5. Centica	ate of Status De			Fee Red	
City & State	<del></del>		City & State					6. Election	n Campaign Fir	ancing		\$5.00	
23		28	28					1	und Contributio			Added to	Fees
Zip	Country	Zip	Zip Country					8. This corporation owes the current year Intangible					
24	25	29		30					al Property Tax				□No
	9. Name and Address of Curre	nt Registere	d Agent		1			10, Name	and Address o	f New Ro	egistered .	Agent	
	ONE CHIEFE				81	Name							
	OND, SANDRA					Street A	ddre	ess (P.O. Box Number is Not Acceptable)					
	SEMINOLE BLVD									•		·	
SEMI	NOLE FL 33772								•				
	•			F	84	City					FL	85 Zip C	ode
								ti oubmi	to this statemen	t for the	ournose of	changing its	registered
	to the provisions of Sections 607.05 egistered agent, or both, in the State						corpor	n's board of	directors. I here	by accep	t the appoi	ntment as rec	gistered
agent. I a	egistered agent, or both, in the State m familiar with, and accept the obliga	ations of, Se	ction 607.0505, Flo	rida Statu	ites								
SIGNATURE				OB OALL		-t -leunburg son	nuland .	when reinstating)		•	DATE		
	Signature, typed or printed name of registered age OFFICERS AI	ent and title if app		13.	Agen	it signatula ret	day ea	ADDITIO	ONS/CHANGES	TO OFF	ICERS AN	ND DIRECTO	RS IN 12
, 12.	CP OFFICERS A	ND DIRECT	DELETE	1.1 TIT	۱F			,				☐ Change	☐ Addition
TITLE	HARVARD, WILLIAM B JR		<b>—</b>	1.2 NA									
NAME	838 MONTEREY BLVD NE					TADDRESS							
STREET ADDRESS	ST PETERSBURG FL 33704			1.4 CIT									
CITY-ST-ZIP	OT TETETIODORIA TE COLOT		☐ DELETÉ	2.1 TFT		1.5						☐ Change	☐ Addition
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}				2.3 ST	REE	TADDRESS							:
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CITY-ST-ZIP				3.4. CI	TY-S	ST-ZIP							□ # 3 3 5 5 5 -
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NAME				5.2 NA									
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NAME				6.2 NA									
STREET ADDRESS			•			T ADDRESS	•	٠	•				
l	1			6.4 CI	ıY۰S	51-ZIP						_	

14. I 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 chapged, or on an attachment with an address, with all other like empowered.