

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000002132

Entity Name: HARKEN, INCORPORATED

FILED  
Jan 08, 2008  
Secretary of State

## Current Principal Place of Business:

1251 E. WISCONSIN AVE.  
PEWAUKEE, WI 53072

## New Principal Place of Business:

## Current Mailing Address:

1251 E. WISCONSIN AVE.  
PEWAUKEE, WI 53072

## New Mailing Address:

FEI Number: 39-1086764

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HARVEY, NEIL  
11 EVONAIRE CIRCLE  
BELLEAIR, FL 33756 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PC ( ) Delete  
Name: HARKEN, PETER O  
Address: W278 N2931 ROCKY POINT  
City-St-Zip: PEWAUKEE, WI 53072

Title: WVC ( ) Delete  
Name: HARKEN, OLAF T  
Address: W238 N2251 BEACH PARK  
City-St-Zip: PEWAUKEE, WI 53072

Title: S ( ) Delete  
Name: SORENSEN, ROSE  
Address: W267 N2926 PETERSON DRIVE  
City-St-Zip: PEWAUKEE, WI 53072

Title: TD ( ) Delete  
Name: SWEET, ROBERT  
Address: 2075D VINCENT DR  
City-St-Zip: BROOKFIELD, WI 53045

Title: D ( ) Delete  
Name: EVANS, HEATHER  
Address: 704 COVENTRY LANE  
City-St-Zip: HARTLAND, WI 53029

Title: D ( ) Delete  
Name: SCHWESSINGER, ED  
Address: 321 RAILROAD AVE  
City-St-Zip: GREENWICH, CT 06830

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROSE SORENSEN

S

01/08/2008

Electronic Signature of Signing Officer or Director

Date