


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 01, 2006 8:00 am**  
**Secretary of State**

05-01-2006 90312 029 \*\*\*150.00

**DOCUMENT # G17811**

1. Entity Name  
**HARDERS HOLDING COMPANY, INC.**



Principal Place of Business      Mailing Address

**5521 E. HIGHWAY 98  
 PANAMA CITY FL 32404**      **5521 E. HIGHWAY 98  
 PANAMA CITY FL 32404**



2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country

1st MOORE      CR2E034 (10/05)

**6. Name and Address of Current Registered Agent**

**HARDERS, HOLTON H.  
 5521 EAST HIGHWAY 98  
 PANAMA CITY FL 32404**

4. FEI Number      Applied For

**59-2311201**      Not Applicable

5. Certificate of Status Desired      **\$8.75 Additional Fee Required**

**7. Name and Address of New Registered Agent**

Name

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

City      **FL**      Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Holton H Harders*      **HOLTON H HARDERS**      **PRESIDENT**      **4-18-06**

Signature, typed or printed name of registered agent and title if applicable      (NOTE: Registered Agent signature required when reinstating)      DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing      **\$5.00 May Be Added to Fees**

Trust Fund Contribution.     

**10. OFFICERS AND DIRECTORS**

TITLE	VP	<input type="checkbox"/> Delete
NAME	COSTELLO, J J	
STREET ADDRESS	919 DENITT ST	
CITY-ST-ZIP	PANAMA CITY FL 32401	
TITLE	PD	<input type="checkbox"/> Delete
NAME	HARDERS, H.H.	
STREET ADDRESS	2865 TUPELO DRIVE	
CITY-ST-ZIP	PANAMA CITY FL	
TITLE	STD	<input type="checkbox"/> Delete
NAME	HARDERS, NANCY R.	
STREET ADDRESS	1517 LOGAN COURT	
CITY-ST-ZIP	PANAMA CITY FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	VP/General Manager	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	William H. Crittenden	
STREET ADDRESS	2004 West 29th Street	
CITY-ST-ZIP	Panama City, FL 32405	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Holton H Harders*      **HOLTON H HARDERS**      **4-18-06**      **8508741500**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #