


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2004 8:00 am
Secretary of State

04-05-2004 90032 003 ***150.00

DOCUMENT # G38722 1. Entity Name MEXICO BEACH HARMON REALTY, INC.	
--	---

Principal Place of Business 1402 HWY 98 MEXICO BCH, FL 32410 US	Mailing Address P.O BOX 13473 MEXICO BEACH, FL 32410
---	--

DO NOT WRITE IN THIS SPACE



02062004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2375153	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HARMON, MARY
HWY 386,2 MI.N.OF INTERSECT.OF HWY 386 &98
MEXICO BCH., FL 32410

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	---

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV HARMON, SAMUEL L. CORNER 14TH ST. & HWY 98 MEXICO BCH, FL 00000,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP HARMON, BARBARA G CORNER 14TH ST. & HWY 98 MEXICO BCH, FL 00000,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HARMON, SAMUEL L. CORNER 14TH ST. & HWY 98 MEXICO BCH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. 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 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: Barbara G. Harmon Barbara G. Harmon 2-15-04

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

Barbara G. Harmon Barbara G. Harmon 4-3-04