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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H20571

(6)

FILED Apr 15 1998 8:00am Secretary of State

HENRY A. HARRIS, INC. Principal Place of Business Mailing Address 1447 REDBUD LN 1447 REDBUD LN JACKSONVILLE FL 32207 JACKSONVILLE FL 32207 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/01/1984 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2443711 Not Applicable 26 21 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Źip Country Zιρ Country This corporation owes or has paid the current year Intangible 24 30 Personal Property Tax due June 30. ☐ Yes ☐ No 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name HARRIS. HENRY A. 1447 REDBUD LANE Street Address (P.O. Box Number is Not Acceptable) 62 JACKSONVILLE FL 32207 83 84 City 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 Signature, typed or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE 1.1 TITLE ☐ Change ☐ Addition HARRIS, HENRY A. 3R2E034 NAME 1.2 NAME 1447 REDBUD LN. STREET ADORESS 1.3 STREET ADDRESS JACKSONVILLE FL 1.4 CITY-ST-ZIP CITY - ST - 7IP Channe Addition DELETE TITLE 2.1 TITLE HARRIS, HENRY A. 2.2 NAME NAME 1447 REDBUD LANE 2.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST-ZIP DELETE ☐ Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ___ Addition TITLE DELETE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-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 eath; 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.

01011451105

HENRY A. HARRIS HOW A. HAMIS

4/10/98

904-396-7580