

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K10401

FILED  
Mar 12, 2012  
Secretary of State

**Entity Name:** HARKINS ORGANIZATION, INC.

**Current Principal Place of Business:**

1490 HIDDEN SPRINGS COVE  
OVIEDO, FL 32765

**New Principal Place of Business:**

**Current Mailing Address:**

1490 HIDDEN SPRINGS COVE  
OVIEDO, FL 32765

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GOLDSMITH, KAREN  
2160 N PARK AVE  
WINTER PARK, FL 32789    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

**OFFICERS AND DIRECTORS:**

Title:                      D  
Name:                      HARKINS, PATRICK L II  
Address:                      1490 HIDDEN SPRINGS COVE  
City-St-Zip:                      OVIEDO, FL 32765

Title:                      D  
Name:                      HARKINS, KATHLEEN M  
Address:                      1040 HOWELL HARBOR DR  
City-St-Zip:                      CASSELBERRY, FL 32707

I hereby 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 all other like empowered.

SIGNATURE: PATRICK L. HARKINS, II

DIR

03/12/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date