

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K23463

(8)

1. Corporation Name

WM. HARRIS ROCK SHOP, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 13 AM 9:52

Principal Place of Business

Mailing Address

% CHARLES W. HARRIS
1118 SNEAD AVE
SARASOTA FL 34237

% CHARLES W. HARRIS
1118 SNEAD AVE
SARASOTA FL 34237

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/09/1988

3a. Date of Last Report

02/16/1994

4. FEI Number

65-0059580

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HARRIS, CHARLES W.
1118 SNEAD AVE
SARASOTA FL 34237

81 Name

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

83

84 City

FL

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 of person named in Block 9 as registered agent and then Agent of the Corporation)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
D
HARRIS, CHARLES W.
1118 SNEAD AVE
SARASOTA FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY, ST, ZIP
☐ Change ☐ Addition

2. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY, ST, ZIP
☐ Change ☐ Addition

3. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY, ST, ZIP
☐ Change ☐ Addition

4. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY, ST, ZIP
☐ Change ☐ Addition

5. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY, ST, ZIP
☐ Change ☐ Addition

6. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY, ST, ZIP
☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and is as true and correct as the information stated in Section 119 (17C)(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and correct and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the recipient or transferee of the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if checked, or on an attachment with an address.

SIGNATURE: CHARLES W. HARRIS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Number

1/10/95 813
3664608