

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001388

FILED
Apr 27, 2008
Secretary of State

Entity Name: THE HARRISON CHARITABLE FOUNDATION, INC

Current Principal Place of Business:

393 N. POINTE RD. #601
OSPREY, FL 34229

New Principal Place of Business:

393 N. POINTE RD.
#601
OSPREY, FL 34229

Current Mailing Address:

393 N. POINTE RD. #601
OSPREY, FL 34229

New Mailing Address:

393 N. POINTE RD.
#601
OSPREY, FL 34229

FEI Number: 58-2023561

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRISON, JOHN R
393 N. POINTE RD. #601
OSPREY, FL 34229 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: P () Delete
Name: HARRISON, JOHN R
Address: 393 N. POINTE RD. #601
City-St-Zip: OSPREY, FL 34229

Title: VD () Delete
Name: HARRISON, BONNIE
Address: 393 N. POINTE RD. #601
City-St-Zip: OSPREY, FL 34229

Title: D () Delete
Name: HARRISON, JOHN PATRICK
Address: 4035 KEATZ DR.
City-St-Zip: SARASOTA, FL 34241

Title: D () Delete
Name: STUART, JENNIFER A
Address: 5241 LEVI LANE
City-St-Zip: SARASOTA, FL 34233

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: HARRISON, JOHN PATRICK
Address: 4035 KEATS DR.
City-St-Zip: SARASOTA, FL 34241

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BONNIE L. HARRISON

VD

04/27/2008

Electronic Signature of Signing Officer or Director

Date