

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001388

FILED  
Mar 31, 2010  
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:**

**Current Mailing Address:**

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

**New Mailing Address:**

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

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

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

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

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BONNIE L. HARRISON

VD

03/31/2010

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

\_\_\_\_\_  
Date