

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000011705

FILED
Apr 30, 2011
Secretary of State

Entity Name: A.D. HARRIS IMPROVEMENT SOCIETY, INC.

Current Principal Place of Business:

819 EAST 11TH STREET
PANAMA CITY, FL 32401

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2033
PANAMA CITY, FL 32402

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MCGOWAN, BLONDELLE H
122 GAYLE AVE.
PANAMA CITY, FL 32401 US

Name and Address of New Registered Agent:

MCGOWAN, BLONDELLE H
819 EAST 11TH STREET
PANAMA CITY, FL 32401 US

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: BLONDELLE MCGOWAN

04/30/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: MCGOWAN, BLONDELLE H
Address: 122 GAYLE AVE.
City-St-Zip: PANAMA CITY, FL 32401

Title: VPD
Name: SHAMPLAIN, TONI
Address: 1915 WILSON AVE. G-6
City-St-Zip: PANAMA CITY, FL 32405

Title: SD
Name: LUCAS, JANICE L
Address: 608 N. CENTER AVE.
City-St-Zip: PANAMA CITY, FL 32401

Title: D
Name: DILLARD, ANITA
Address: 1229 DUNDEE LANE
City-St-Zip: LYNN HAVEN, FL 32444

Title: D
Name: HARRIS, ALBERT D JR.
Address: 3162 WOOD VALLEY RD.
City-St-Zip: PANAMA CITY, FL 32405

Title: TD
Name: HUTCHERSON, MARIAN
Address: 452 E. 19TH STREET, #703
City-St-Zip: PANAMA CITY, FL 32405

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: JANICE L. LUCAS

SD

04/30/2011

Electronic Signature of Signing Officer or Director

Date