

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 27 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # N11680 (8)

1. Corporation Name

JOHN H. AND LUCILE HARRIS FOUNDATION, INC.

Principal Place of Business

Mailing Address

% JOHN H HARRIS
5811 PELICAN BAY BLVD., SUITE #615
NAPLES FL 33963
US

% JOHN H HARRIS
5811 PELICAN BAY BLVD., SUITE #615
NAPLES FL 33963

3. Date Incorporated or Qualified

10/21/1995

4. FEI Number

59-2600172

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

34108

25

29

34108

30

6. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HARRIS, JOHN H
5811 PELICAN BAY BLVD
SUITE 615
NAPLES FL 33963- 34108

81 Name

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

83

84 City

FL

85

Zip Code
34108

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

1.1 TITLE ☐ Change ☒ Addition

NAME HARRIS, JOHN H
STREET ADDRESS 100 GLENVIEW PLACE, #PH4
CITY-ST-ZIP NAPLES FL

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP 34108

TITLE ☐ DELETE

2.1 TITLE ☐ Change ☒ Addition

NAME HARRIS, LUCILE H
STREET ADDRESS 100 GLENVIEW PLACE, #PH4
CITY-ST-ZIP NAPLES FL

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP 34108

TITLE ☐ DELETE

3.1 TITLE ☐ Change ☒ Addition

NAME HARRIS, JOHN H II
STREET ADDRESS 901 46 ST
CITY-ST-ZIP MOLINE IL

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP 61265

TITLE ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

John H. Harris

4/16/98

9415978687

CR2E037 (10/97)