

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21322

FILED  
Apr 09, 2009  
Secretary of State

Entity Name: HARRY-ANNA INVESTMENT FUND, INC.

**Current Principal Place of Business:**

24175 SE HWY 450  
UMATILLA, FL 32784 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 49  
UMATILLA, FL 327840049 US

**New Mailing Address:**

FEI Number: 59-2825890

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SEIBERT, CARL T  
24175 SW HWY 450  
UMATILLA, FL 32784 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: PD ( ) Delete  
Name: SMITH, MICHAEL F  
Address: POST OFFICE DRAWER EE  
City-St-Zip: PLANT CITY, FL 33566 US

Title: VPD ( ) Delete  
Name: ELMORE, THOMAS E  
Address: 1855 N.W.FRONTIER DRIVE  
City-St-Zip: LAKE CITY, FL 32055 US

Title: S ( ) Delete  
Name: SEIBERT, CARL T  
Address: 24175 SE HWY 450  
City-St-Zip: UMATILLA, FL 32784 US

Title: T ( ) Delete  
Name: BRYANT, JOSEPH B  
Address: 302 SPARROW AVENUE  
City-St-Zip: SEBRING, FL 33872 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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: CARL T. SEIBERT

S

04/09/2009

Electronic Signature of Signing Officer or Director

Date