NONPROFIT CORPORATION **ANNUAL REPORT** 



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

1996

DOCUMENT # N37147

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HARRIS	s users group, inc.			 	
Principal Place	of Business	Mailing Address		E ISONIUS ODD NIN IDSUN FRUI I	BIN JOHN STANI DIBIN DIBIN BIBIN BIDIN BIDIN INDI
% DIANE CONSTANTINO 1301 34TH STREET NORTH ST. PETERSBURG FL 33713 US		% DIANE CONSTANTINO 1301 34TH STREET NORTH ST. PETERSBURG FL 33713 US			
				<ol> <li>Date Incorporated or Qualified 03/15/1990</li> </ol>	3a. Date of Last Report 05/01/1995
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied Far
21		26		59-3005713	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
Crty & State		City & State		<b>F</b> 51-10-0-10-5	Fee Required
23		28		6. Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
Ζιρ	Country	Zφ	Country		or intangible tax under s. 199.032.
24	25	29	30	Florida Statutes	Yes No
	Name and Address of Currer	nt Hegistered Agent	81 Name	10. Name and Address of New	Registered Agent
CONSTA	ANTINO, DIANE E.				
1301-34TH STREET NORTH			82 Street	Address (P.O. Box Number is Not Accept	able)
	ERSBURG FL 33713		83		
			84 City		<b>85</b> Zip Code
44 D	And the second s				FL     '
or register	reu agent, or both, in the State of Fion	da. Such change was authorize	ed by the corporation s	orporation submits this statement for the p s board of directors. I hereby accept the ap	purpose of changing its registered office oppointment as registered agent. I am
	th, and accept the obligations of, Sect	tion 617.0503, Florida Statutes			- 0
SIGNATURE	Signature, typed or printed name of registered agenc	can the tappitable (NO	Thir Ring sterie. I Agent signature	Repured When real-Statings	DATE
12.		ID DIRECTORS	13.		FFICERS AND DIRECTORS IN 12
TITLE	STD	DELETE	1.1 TITLE	D	Change 🔀 Addition
NAME CIOSET IDDOSCO	CONSTANTINO, DIANE		1.2 NAME	Atwood, Mike	
STREET ADDRESS CITY - ST - ZIP	1301 34TH ST. N ST. PETERSBURG FL		1.3 STREET ADDRESS	500 3rd Ave.S.E.	
TIFLE	D D	DELETE	1 4 CITY - ST - ZIP 2 1 THLE	Cedar Rapids, 10	Change 🔀 Addition
NAME	PARKS, LISA		2.2 NAME	Rimbey, Mike	
STREET ADDRESS	1729 GRAND		2.3 STHEET ADDRESS	_	
CITY+ST-ZIP	KANSAS CITY MO		2 4 CITY - ST - ZIP	120 E. Van Buren Phoenix, Arizona	St.
TITLE	PD	<b>₽</b> BE€ETE	3.1 TITLE	D	☐ Change 🙀 Addition
NAME	HALL, MIKE		3.2 NAME		
STREET ADDRESS  CITY-ST-ZIP	750 N GENE AUTRY TRAIL PALM SPRINGS CA		3 9 STREET ADDRESS	Burton Katina 633 N.Orange Ave. Orlando, Fla.	
TITLE	D D	โมยียย 	3.4 CITY ST ZIF	D	[ ] Change Addition
NAME	BARKER, WILLIAM FI.		4 2 NAME	1 = . '	Shango Noshori
STREET ADDRESS	333 F GRAGG ST.		4.3 STREET ADDRESS	Ziosyo Street	
CITY-ST-ZIP	RICHMOND VA		4.4 CITY - ST - ZIP	Sacramento, Ca	
TITLE		DELETE	5 1 TITLE		Change Addition
NAME Assess appeared			5 2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP TITLE	<u> </u>	DELETE	5 4 CITY - ST - ZIP 6 1 TILLE		Change Addition
NAME			62 NAME		FLOURING FLANDSON
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - ZIP			6 4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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: SIGNATURE and TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/19/96 8/3-893-8797