

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **N99000006696**

1. Entity Name

HARMMEYER, Inc

Amended
02 NOV - 3 PM 3:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

600008807366
11/05/02--01069--009 **\$1.25

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4600 Touchton Rd

Suite, Apt. #, etc.

Blkg. 100 Ste 150

City & State

Jacksonville, FL

Zip

32246

Country

USA

3. Mailing Address

P.O. Box 40091

Suite, Apt. #, etc.

City & State

Jacksonville, FL

Zip

32203

Country

USA

4. FEI Number

65-0959896

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

HARRY MYERS

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

4600 Touchton Rd

Blkg. 100 Ste 150

City

Jacksonville

FL

Zip Code

32246

8. 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

HARRY M

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

(NOTE: Registered Agent signature required when resigning)

DATE

Oct 28, 2002

FEE IS \$61.25

Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PRESIDENT/DIRECTOR
HARRY M. MYERS
4600 Touchton Rd Ste 150 Bl. 100
Jacksonville, FL 32246**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VICE PRESIDENT/SEC
HENRY L. MYERS
2375 NW 26 ST
FT LAUDERDALE, FL 33311**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TREASURER
ELIE WARREN
4910 DORRNBROOK AVE
Jacksonville, FL 32208**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DIRECTOR
DORIS DIVINS
600 W. SPAN RD
ETTINGHAM, S.C. 29541**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DIRECTOR
ROSS CLAYTON JENKINS
14122 CRYSTAL COVE DR
JACKSONVILLE, FL 32224**

TITLE
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12. 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 report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

HARRY M. MYERS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HARRY M. MYERS

pres 10/28/02

(904) 722-9821

CR2ED37B (12/01)

OFFICER / DIRECTOR RESIGNATION

I, IRIS CLEMMONS, hereby resign as TREASURER
(Title)

of HARMeyer, INC
(Name of Corporation)

a corporation organized under the laws of the State of FLORIDA

and affirm that the corporation has been notified in writing of the resignation.

Iris Clemmons
(Signature of resigning officer/director)

~~FILING FEE IS \$35.00~~

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

8-5-02

I IRIS CLEMMONS do here by
RESIGN AS TREASURER OF HARMENEA
INC. this day Aug. 4, 2002.

Iris Clemmons
IRIS CLEMMONS

8-4-02