

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006696

FILED  
Jul 25, 2006  
Secretary of State

Entity Name: HARMEYER, INC.

## Current Principal Place of Business:

4600 TOUCHTON ROAD  
BLDG 100, STE. 150  
JACKSONVILLE, FL 32246 US

## New Principal Place of Business:

## Current Mailing Address:

4600 TOUCHTON RD  
BLDG 100 STE 150  
JACKSONVILLE, FL 32246 US

## New Mailing Address:

2616 LIBERTY ST  
JACKSONVILLE, FL 32206 US

FEI Number: 65-0959896      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

MYERS, HARRY M  
4600 TOUCHTON ROAD  
BLDG 100, STE. 150  
JACKSONVILLE, FL 32246 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: PDT ( ) Delete  
Name: MYERS, HARRY M  
Address: 4600 TOUCHTON ROAD, STE. 150  
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: VPD ( ) Delete  
Name: MYERS, HENRY  
Address: 2375 NW 26 ST  
City-St-Zip: FT LAUDERDALE, FL 33311

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDTS (X) Change ( ) Addition  
Name: MYERS, HARRY M  
Address: 2616 LIBERTY ST  
City-St-Zip: JACKSONVILLE, FL 32206 US

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

I hereby certify that the information supplied with this filing does not qualify for the 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: HARRY M. MYERS

PDTS

07/25/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date