

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000088724

**FILED**  
**Mar 17, 2005**  
**Secretary of State**

**Entity Name:** HARDING & ASSOCIATES TAX SERVICES, INC.

**Current Principal Place of Business:**

113 PONTOTOC PLAZA  
AUBURNDALE, FL 33823

**New Principal Place of Business:**

113 PONTOTOC PLAZA  
AUBURNDALE, FL 33823

**Current Mailing Address:**

113 PONTOTOC PLAZA  
AUBURNDALE, FL 33823

**New Mailing Address:**

113 PONTOTOC PLAZA  
AUBURNDALE, FL 33823

FEI Number: 59-3672993

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HARDING, SUSAN J  
113 PONTOTOC PLAZA  
AUBURNDALE, FL 33823 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: HARDING, SUSAN J  
Address: 505 AVENUE A NW SUITE 102  
City-St-Zip: WINTER HAVEN, FL 33881

Title: D ( ) Delete  
Name: HARDING, ALAN J  
Address: 505 AVENUE A NW SUITE 102  
City-St-Zip: WINTER HAVEN, FL 33881

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

Title: D (X) Change ( ) Addition  
Name: HARDING, SUSAN J  
Address: 113 PONTOTOC PLAZA  
City-St-Zip: AUBURNDALE, FL 33823

Title: D (X) Change ( ) Addition  
Name: HARDING, ALAN J  
Address: 113 PONTOTOC PLAZA  
City-St-Zip: AUBURNDALE, FL 33823

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSAN HARDING

MRS

03/17/2005

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

\_\_\_\_\_ Date