

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2004 8:00 am
Secretary of State

03-15-2004 90004 028 ***150.00

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1. Entity Name
HARBOR BRANCH SHRIMP, INC.



Principal Place of Business
5600 U.S. HIGHWAY 1 NORTH
FT. PIERCE, FL 34946

Mailing Address
5600 U.S. HIGHWAY 1 NORTH
FT. PIERCE, FL 34946

54017973



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01212004 Chg-P CR2E034 (10/03)

4. FEI Number
65-1124206

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STEWART, WILLIAM J
3366 OCEAN DRIVE
VERO BEACH, FL 32963

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
WIDDER, D. R.
5600 US 1 NORTH
FORT PIERCE, FL 34946 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CD
HERMAN, RICK
5600 U S HWY 1 N
FORT PIERCE, FL 34946 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
DAVIS-HODGKINS, MEGAN
5600 U S HWY 1 N
FORT PIERCE, FL 34946 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
KING, LARRY P
14816 HARTFORD RUN DR.
ORLANDO, FL 32828 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPD
MOUNTAIN, JOE
5600 U S HWY 1 N
FORT PIERCE, FL 34946 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HOFF, FRANK
33418 OLD ST. JOE ROAD
DADE CITY, FL 33525 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SUZANNE LEFPEW
4900 13th LANE
VERO BEACH, FL 32966 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
VINCENT BURKE
5600 U.S. HWY 1 N
FT. PIERCE, FL 34946 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPD
PETER - VAN WYK
5600 U.S. HWY 1 N
FT. PIERCE, FL 34946 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Larry P King, CFO

1/23/04

772-465-2400