## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000054668

Entity Name: HARRY'S SERVICE OF LEHIGH ACRES, INC.

FILED Jan 27, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

502 GRANT AVE

LEHIGH ACRES, FL 33972

Current Mailing Address: New Mailing Address:

502 GRANT AVE 502 GRANT AVE

LEHIGH ACRES, FL 33972 LEHIGH ACRES, FL 33972 US

FEI Number: 65-0065261 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BOWERS, ROBERT L HARLANDER, EDELTRAUD 23 COLORADO ROAD 502 GRANT AVE

LEHIGH ACRES, FL 33936 US LEHIGH ACRES, FL 33972 US

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: EDELTRAUD HARLANDER 01/27/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition

Name: HARLANDER, EDELTRAUD Name: HARLANDER, EDELTRAUD

Address: 502 GRANT AVE Address: 502 GRANT AVE

City-St-Zip: LEHIGH ACRES, FL 33972 City-St-Zip: LEHIGH ACRES, FL 33972 US

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: EDELTRAUD HARLANDER PD 01/27/2005