

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000022550

FILED
Jan 15, 2008
Secretary of State

Entity Name: HARLIN FINANCIAL SERVICES INC.

Current Principal Place of Business:

2502 NW 31ST AVENUE
GAINESVILLE, FL 32605

New Principal Place of Business:

Current Mailing Address:

PO BOX 357756
GAINESVILLE, FL 32635

New Mailing Address:

PO BOX 357756
GAINESVILLE, FL 326357756

FEI Number: 36-4520777

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GERRY, JOHN
2502 NW 31ST AVENUE
GAINESVILLE, FL 32605 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: GERRY, JOHN
Address: 2502 NW 31ST AVENUE
City-St-Zip: GAINESVILLE, FL 32605

Title: D (X) Delete
Name: SKALSKY, RICKIE
Address: 2502 NW 31ST AVE
City-St-Zip: GAINESVILLE, FL 32605

Title: D () Delete
Name: GERRY, LINDA
Address: 2502 NW 31ST AVENUE
City-St-Zip: GAINESVILLE, FL 32605

Title: D () Delete
Name: DISHMAN, KENNETH R III
Address: 320 TROWBRIDGE WALK
City-St-Zip: ATLANTA, GA 30350

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

SIGNATURE: JOHN GERRY

D

01/15/2008

Electronic Signature of Signing Officer or Director

Date