

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Feb 13, 2008 08:00 AM
Secretary of State**

DOCUMENT # P03000102341

**1. Entity Name
HARWARD CONSTRUCTION, INC.**



**Principal Place of Business
2217 NW PINE AVE.
OCALA, FL 34475**

**Mailing Address
2217 NW PINE AVE.
OCALA, FL 34475**



01242008 No Chg-P CR2E034 (11/05)

**4. FEI Number
20-0341414**

**Applied For
Not Applicable**

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**ROBSON, SCRIBNER & STEWART, PA
307 NE 36TH AVE.
SUITE #1
OCALA, FL 34470**

**DO NOT WRITE
IN THIS SPACE**

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, 2008 Fee will be \$550.00**

**9. Election Campaign Financing
Trust Fund Contribution. ☐**

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

| | |
|-----------------------|---------------------------|
| TITLE | P |
| NAME | HARWARD, LEO L |
| STREET ADDRESS | 2217 NW PINE AVE. |
| CITY-ST-ZIP | OCALA, FL 34475 |
| TITLE | VP,S |
| NAME | HARWARD, GARY |
| STREET ADDRESS | 13310 NE 33RD AVE. |
| CITY-ST-ZIP | ANTHONY, FL 32617 |
| TITLE | VP,T |
| NAME | HARWARD, DAVID A |
| STREET ADDRESS | 13838 NE 45TH AVE. |
| CITY-ST-ZIP | ANTHONY, FL 32617 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Gary Harward
GARY HARWARD
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/12/08
Date

352-622-8978
Daytime Phone #