


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 25, 2008 8:00 am**  
**Secretary of State**

01-25-2008 90030 013 \*\*\*158.75

|  |  |   |   |   |  |
|--|--|---|---|---|--|
| <b>DOCUMENT # P03000120520</b><br>1. Entity Name<br><b>HARLEY TERRELL CONSTRUCTION, INC.</b>   |  |   |   |    |  |
| Principal Place of Business<br>P.O. BOX 29<br>GENEVA, FL 32732   |  |   | Mailing Address<br>P.O. BOX 29<br>GENEVA, FL 32732  |   |  |
| 2. Principal Place of Business - No P.O. Box #<br><b>3395 East SR 46</b><br>Suite, Apt. #, etc.  |  | 3. Mailing Address<br>Suite, Apt. #, etc.   |   |   |  |
| City & State<br><b>Geneva FL</b>   |  | City & State  |   | 4. FEI Number<br><b>20-0342855</b>  |  |
| Zip<br><b>32732</b>  |  | Country<br><b>US</b>  |   | 5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75</b> Additional Fee Required  |  |
| 6. Name and Address of Current Registered Agent<br><br><b>TERRELL, HARLEY</b><br><b>3395 EAST ST RT 46</b><br><b>GENEVA, FL 32732</b>  |  |   |   | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br><div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div> |  |
| 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.<br><br>SIGNATURE _____<br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>  |  |   |   |   |  |
| <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After May 1, 2008 Fee will be \$550.00</b>  |  | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees |   |   |  |
| 10. OFFICERS AND DIRECTORS   |  |   | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <b>P</b><br><b>TERRELL, HARLEY</b><br><b>3395 EAST ST RD 46</b><br><b>GENEVA, FL 32732</b> <input type="checkbox"/> Delete                   |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <b>SEC</b><br><b>TERRELL, CASSANDRA N</b><br><b>3395 EAST ST RD 46</b><br><b>GENEVA, FL 32732</b> <input checked="" type="checkbox"/> Delete |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <b>Sec</b><br><b>Harley Terrell</b><br><b>3395 East SR 46</b><br><b>Geneva FL 32732</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <b>VP</b><br><b>TERRELL, HARLEY</b><br><b>3395 EAST ST RD 46</b><br><b>GENEVA, FL 32732</b> <input type="checkbox"/> Delete                  |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <input type="checkbox"/> Delete  |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |  |
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| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <input type="checkbox"/> Delete  |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |  |
| 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: <u>Harley Terrell</u><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>  |  |   | <div style="display: flex; justify-content: space-between;"> <span><u>1/21/08</u><br/><small>Date</small></span> <span><u>407-349-9121</u><br/><small>Daytime Phone #</small></span> </div> |   |  |

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