

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000001195

Entity Name: HARRIS INTERNATIONAL, INC.

FILED  
Apr 13, 2009  
Secretary of State

## Current Principal Place of Business:

1801 E COLONIAL DRIVE  
SUITE 219  
ORLANDO, FL 32803

## New Principal Place of Business:

1516 E. COLONIAL DRIVE  
SUITE 304  
ORLANDO, FL 32803

## Current Mailing Address:

PO BOX 532053  
ORLANDO, FL 328532053

## New Mailing Address:

FEI Number: 20-0586759

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MOORE, BONNIE S  
1801 E COLONIAL DRIVE  
SUITE 219  
ORLANDO, FL 32803 US

## Name and Address of New Registered Agent:

MOORE, BONNIE S  
1516 E. COLONIAL DRIVE  
SUITE 304  
ORLANDO, FL 32803 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: BONNIE S. MOORE

04/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: HARRIS, AZORE'  
Address: 211 ALMADEN COURT  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: T ( ) Delete  
Name: MOORE, JONATHAN W  
Address: 1801 E. COLONIAL DRIVE, SUITE 219  
City-St-Zip: ORLANDO, FL 32803

Title: S ( ) Delete  
Name: MOORE, BONNIE S  
Address: 211 ALMADEN COURT  
City-St-Zip: WINTER SPRINGS, FL 32708

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: HARRIS, AZORE'  
Address: PO BOX 532053  
City-St-Zip: ORLANDO, FL 328532053

Title: T (X) Change ( ) Addition  
Name: MOORE, JONATHAN W  
Address: PO BOX 532053  
City-St-Zip: ORLANDO, FL 328532053

Title: S (X) Change ( ) Addition  
Name: MOORE, BONNIE S  
Address: PO BOX 532053  
City-St-Zip: ORLANDO, FL 328532053

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: JONATHAN W. MOORE

T

04/13/2009

Electronic Signature of Signing Officer or Director

Date